



PERSONAL DETAILS

Title: Mr / Mrs / Ms / Dr / Other _____ Home address: _____

First name: _____ Suburb / Town: _____

Middle name: _____ State: _____ Postcode: _____

Last name: _____ Home phone: _____

Pref. name: _____ Mobile phone: _____

Your email: _____ Date of birth: _____

I hereby apply for Alumni membership of the Professional Organisation "Victorian Principals Association Incorporated" and I undertake to conform to the rules of the Association.

Signed: _____ Date: _____

PAYMENT METHODS VPA Alumni Class Membership: \$95.00 p.a. All amounts are inclusive of GST.

Cheque made payable to Victorian Principals Association – **\$95.00 per annum**

Credit Card – **\$95.00 per annum** Visa MasterCard

Credit card no.: _____ Expiry date: _____ / _____

Card holder name: _____ Signature: _____

CREDIT CARD DEDUCTION AUTHORITY TO VICTORIAN PRINCIPALS ASSOCIATION

I hereby authorise deductions of \$95.00 inclusive of GST yearly from my credit card in favour of the VICTORIAN PRINCIPALS ASSOCIATION INC. and I request that the deductions operate from the earliest possible date upon receipt of this authority.

Full name: _____ Signature: _____ Date: _____