



Name:

Position:

Organisation:

Postal Address:

Telephone: Mobile:

Fax: Email:.....

Membership Rates: (please indicate which applies. All rates are in AUD)

- Academic, IR/HRM Practitioner AU\$65.00 annual membership
- Full time student AU\$25.00 annual membership
- Institution AU\$120.00 annual membership
- Please indicate membership year _____
- Please indicate if you wish to receive hard copies of IERA Journals
(Notification of soft-copy release will be sent to all members via email)

Note: IERA Membership runs in line with the Australian financial year – 1 July to 30 June.

Payment

Option A:

Cheque/Bankdraft enclosed for AU\$

All cheques should be made payable to IERA in AUD only

Option B:

Direct Bank Transfer, sum transferred AU\$

Account Name: International Employment Relations Association

BDSB: 062 309

Account Number: 1001 5547

Option C.

Please debit my Visa MasterCard (please indicate) the amount of AU\$.....

Card Number:

Cardholder's name:

Expiry date: Signature:

Please forward to:
Ms Robyn Johns, Treasurer
PO Box 1752, Lane Cove NSW 1595, AUSTRALIA
Email: treasurer@iera.net.au
Fax: +61 (0)2 9514 5583