



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)*

**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  
BSB: 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:  
IERA  
PO Box 1428  
Bakery Hill, VIC 3354  
AUSTRALIA  
Email: [iera\\_admin@iera.net.au](mailto:iera_admin@iera.net.au)