



Personal Details

Title _____ Surname _____

Given names _____ D.O.B. _____

Postal address _____

Postcode _____ Phone _____ Mobile _____

Preferred email _____

Alternate email _____

Workplace _____ Campus/Suburb _____

Reason for joining _____

Tick an option re how you find out about the IEU? Web Search Social Media Uni Student Colleague
 Uni Lecturer/Advisor IEU(SA) Member IEU(SA)Organiser IEU(SA) Display/Event IEU(SA) email newsletter
 Other - please describe: _____

Teaching Staff

Job description (eg. Teacher, Principal, TRT)

Point time _____ Step/PT/G _____ POR/HAT/AST _____

Level (eg. ELC, Secondary) _____ Speciality _____

If first year graduate, date of first appointment _____

Non-Teaching Staff

Job description (eg. Admin, Grounds, Curriculum)

Grade _____ Year level _____ Point time _____

Hours per week _____ Weeks per year _____

Join Now

I hereby apply for membership of both Independent Education Union (SA) Inc., ABN 37 581 749 503 and Independent Education Union (SA) Branch ABN 26 954 644 024, the SA Branch of the Independent Education Union of Australia, and agree to abide by the rules of these organisations and pay the appropriate fees as varied from time to time. I acknowledge that no assistance will be provided on issues that pre-date my financial membership and that it is my responsibility to update my information promptly. The pro-rata monthly membership fee will be charged on receipt of this completed form to confirm membership.

Date _____ Signature _____

Fee Schedule - 1 February 2020

Please tick appropriate category

Category	Gross annual salary (before tax & salary sacrifice)	Monthly
<input type="checkbox"/> B	Less than \$20,000 pa	\$14.60
<input type="checkbox"/> C	\$20,001 - \$25,000 pa	\$18.35
<input type="checkbox"/> D	\$25,001 - \$30,000 pa	\$22.10
<input type="checkbox"/> E	\$30,001 - \$35,000 pa	\$25.85
<input type="checkbox"/> F	\$35,001 - \$40,000 pa	\$29.60
<input type="checkbox"/> G	\$40,001 - \$45,000 pa	\$33.35
<input type="checkbox"/> H	\$45,001 - \$50,000 pa	\$37.10
<input type="checkbox"/> I	\$50,001 - \$55,000 pa	\$40.85
<input type="checkbox"/> J	\$55,001 - \$60,000 pa	\$44.60
<input type="checkbox"/> K	\$60,001 - \$65,000 pa	\$48.35
<input type="checkbox"/> L	\$65,001 - \$70,000 pa	\$52.10
<input type="checkbox"/> M	\$70,001 - \$75,000 pa	\$55.85
<input type="checkbox"/> N	\$75,001 - \$80,000 pa	\$59.60
<input type="checkbox"/> O	\$80,001 - \$85,000 pa	\$63.35
<input type="checkbox"/> P	\$85,001 - \$90,000 pa	\$67.10
<input type="checkbox"/> Q	\$90,001 - \$95,000 pa	\$70.85
<input type="checkbox"/> R	\$95,001 - \$100,000 pa	\$74.60
<input type="checkbox"/> S	\$100,001 pa & above	\$82.90
<input type="checkbox"/> LWOP/Not employed in sector/Parental leave		\$10

TRT: Please estimate your current annual earnings to determine your category

*Subject to change without notice

Planned Unpaid Leave (1 month or more)

Leave type LWOP Parental leave

Start date _____

End date _____

Payment Option 1: Credit Card

Please deduct the appropriate fee amount which may be adjusted from time to time. This authority shall remain in force until I advise otherwise.

*Monthly payments are processed on the first Wednesday of the month.

I choose to pay my fees: Monthly Yearly

Card number _____ Expiry _____

Name on card _____

Cardholder signature _____

Payment Option 2: Monthly Direct Debit

I, _____, authorise the Independent Education Union (South Australia) Branch (IEU(SA)), ABN 26 954 644 024, the Debit User, (No.077399), to debit the account, detailed below, through the Direct Debit System, on an ongoing monthly basis until further notice, with the appropriate IEU(SA) membership fee as adjusted from time to time. This authority is to remain in force until I advise otherwise.

Signature _____ Date _____

Name of financial institution _____

Name on account _____

BSB _____ Account number _____

Personal information is collected for the purpose of assisting and communicating with members. Information is handled in accordance with the IEU(SA) Privacy Policy – located at: ieusa.org.au/privacy-policy. **Resignation of membership** must be in writing and will take effect 30 days from receipt of your request, with fees payable until the date of effect. **Direct Debit Service Agreement** located at: ieusa.org.au/direct-debit-request-form.