**ORGANIZATIONAL MEMBERSHIP APPLICATION FORM**

*This form is for the use of organizations wishing to become an Organizational Member of Action Learning, Action Research Association Ltd (ALARA).*

*Please complete all fields on page 1 and the relevant field on page 2.*

**On behalf of the organization nominated below, I wish to apply for Organizational Membership of Action Learning, Action Research Association Ltd (ALARA)**

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| **Name of Organization**     **Trading Name** (if applicable)      | **ACN / Company Reg. Number**     **ABN** (for Australian companies)      |
| **Street Address**      | **Town / City**      |
| **Postcode/Zip**:      | **State / County**      | **Country**      |
| **Postal Address** (if different from Street Address)      | **Town / City**      |
| **Postcode/Zip**:      | **State / County**      | **Country**      |
| **Web Address**       |
| **Authorised Representative’s Name**Title Given Name Family Name                  |
| **Telephone**Country Code Telephone Number            | **Mobile Telephone**Country Code Mobile Number            |
| **Position Title** |
| **Email**  |
| **Authorised Representative’s Areas of Interest** (Please tick all relevant)      Education       Community / Social Justice       Gender Issues      Health       Indigenous Issues       Organizational Development |
| **Description**  of your organization     Please attach or email to admin@alarassociation.org a copy of your organization’s Mission and organizational objectives (for example, from your organization’s Constitution) |
| See over for Annual Fees and Payment Methods |

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| **ORGANIZATION CATEGORIES & ANNUAL FEES**, including GST where applicable(Please select one type of membership) |
| Is your organization a sub-group of an already registered ALARA Organizational Member? (For example, is your organization a research centre at an already registered university, or an agency of an already registered government department?) If your organization is a sub-group of an already registered Organizational Member, ALARA waives your organization’s membership fee and your organization still enjoys the benefits of being an Organizational Member of ALARA.**Name of Organizational Member of which your organization is a part**      |
| [ ]  **Corporate**(Any business or organization that employs more than 200 staff and has a demonstrated commitment to supporting the development of the AR/PAR/AL practice)**AUD 500.00** | [ ]  **Professional**(Any allied professional organization that supports ALARA’s objectives, e.g. a professional association or university. Note, this excludes Affiliate Organizations)**AUD 350.00** | [ ]  **SME**(Any business or organization that employs between 10 and 200 staff and has a demonstrated commitment to supporting the development of the AR/PAR/AL practice)**AUD 200.00** |
| [ ]  **Micro Enterprise**(Any business or organization that employs 10 or less staff and has a demonstrated commitment to supporting the development of the AR/PAR/AL practice)**AUD 143.00** | [ ]  **Affiliate**(Any peer professional AL and AR network or association that shares substantially similar goals and objectives in AL, AR, PM and PAR, and actively promotes AR and AL through its mission and activities. ALARA may enter into reciprocal membership arrangements with like-organizations – please contact ALARA to discuss)**AUD 143.00** (non-reciprocal arrangements) |
| ***By submitting this membership form, I confirm that:******(a) I am authorised to act on behalf of the organization named on page 1,******(b) I have read, understood and accept, on behalf of the organization, ALARA’s Privacy Policy (***[**https://www.alarassociation.org/sites/default/files/docs/policies/ALARA\_PrivacyPolicy11\_1.pdf**](https://www.alarassociation.org/sites/default/files/docs/policies/ALARA_PrivacyPolicy11_1.pdf)***) and******(c) I understand that membership must be approved by ALARA’s Management Committee before the organization can become a member of ALARA.*** |
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| We offer a range of payment options. Details can be provided on the Tax Invoice that we will send to you on receipt of your membership application |  |  |  |

**Individuals can join and pay online at** [**https://www.alarassociation.org/about-us/joining-alara**](https://www.alarassociation.org/about-us/joining-alara)**.**Organizational membership must be applied for by returning the completed form to ALARA:**By post to:** ALARA Membership PO Box 162 GREENSLOPES Queensland 4120 AUSTRALIA**By FAX to:** + 61 (7) 3342 1669 **By email to:** admin@alarassociation.org |

ALARA will acknowledge receipt of your application and send you an invoice receipt of payment. You will receive an email confirming activation of your account, and details on how you can access website functions.