

Application to be an Individual member

The New South Wales Council for Intellectual Disability.

R.J. SMITH	Your name
	Address
123 4567 1 2 3 4 5 6 7 8 9	Phone number
VOU@mail.com	Email

	Membership Agreement
	I have read and understood CID's Ethical Framework and I agree to follow the Ethical Framework as a member of CID.
	You can read the Ethical Framework of our website <u>Ethical Framework - Council for</u> <u>Intellectual Disability (cid.org.au)</u> or contact CID for a copy.
5 Yournam	My signature
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Date

Membership payment

CID has different types of membership. Tick the box next to the membership you want to apply for.
Person in paid work \$35 Includes GST
Person not in paid work \$15
Person with intellectual disability Free

This form will be a **tax invoice** when you make your payment.

Tick how you will pay

COMPUTA	Online (EFY) Pay the membership fee to Account name NSW Council for Intellectual Disability BSB 062 003 Account Number 10012767
YourBank CREDIT CARD L234 5678 4321 A765 9723 9725	Credit Card When we get this form we will send an invoice to tell you how to pay by credit card
e-mail	Email the membership form to info@cid.org.au
Pell handle to post bulky items	Post to Council for Intellectual Disability Level 2, 418A Elizabeth St, Surry Hills 2010
	When we get the form The Board will decide if you can be a member. CID will tell you what the Board decides.