



## Section 3 – Second Representatives Contact Details

Complimentary second representative included in membership.

<b>Company:</b>																										
<b>Title:</b>						<b>First Name:</b>																				
<b>Surname:</b>																										
<b>Position:</b>																										
<b>Street Address:</b>																										
<b>Suburb:</b>																										
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO											
<b>Postal Address:</b>																										
<b>Suburb:</b>																										
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO											
<b>Telephone:</b>	(	0	)																							
<b>Fax:</b>	(	0	)																							
<b>Mobile:</b>	(	0	4	)																						
<b>Email:</b>																										

## Section 4 – Third Representatives Contact Details

Complimentary third representative included in membership.

<b>Company:</b>																										
<b>Title:</b>						<b>First Name:</b>																				
<b>Surname:</b>																										
<b>Position:</b>																										
<b>Street Address:</b>																										
<b>Suburb:</b>																										
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO											
<b>Postal Address:</b>																										
<b>Suburb:</b>																										
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO											
<b>Telephone:</b>	(	0	)																							
<b>Fax:</b>	(	0	)																							
<b>Mobile:</b>	(	0	4	)																						
<b>Email:</b>																										

## Section 5 – Fourth Representatives Contact Details

Additional membership charges apply for greater than three representatives.

<b>Company:</b>																					
<b>Title:</b>						<b>First Name:</b>															
<b>Surname:</b>																					
<b>Position:</b>																					
<b>Street Address:</b>																					
<b>Suburb:</b>																					
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO						
<b>Postal Address:</b>																					
<b>Suburb:</b>																					
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO						
<b>Telephone:</b>	(	0	)																		
<b>Fax:</b>	(	0	)																		
<b>Mobile:</b>	(	0	4	)																	
<b>Email:</b>																					

## Section 6 – Fifth Representatives Contact Details

Additional membership charges apply for greater than three representatives.

<b>Company:</b>																					
<b>Title:</b>						<b>First Name:</b>															
<b>Surname:</b>																					
<b>Position:</b>																					
<b>Street Address:</b>																					
<b>Suburb:</b>																					
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO						
<b>Postal Address:</b>																					
<b>Suburb:</b>																					
<b>State:</b>						<b>Post Code:</b>						<b>Preferred Address:</b>	YES	/	NO						
<b>Telephone:</b>	(	0	)																		
<b>Fax:</b>	(	0	)																		
<b>Mobile:</b>	(	0	4	)																	
<b>Email:</b>																					

## Section 7 – Payment Details

I enclose a cheque/money order payable to 'Aquatic & Recreation Institute' for the amount of:	\$				-		
I enclose an official order form for an invoice to be raised							
I wish to pay by credit card (see below)							

### Address for invoicing

	Please use the street address in Section 1
	Please use the postal address in Section 1
	Please use this address for invoicing only:

<b>Name:</b>																					
<b>Organisation:</b>																					
<b>Address:</b>																					
<b>Suburb:</b>																					
<b>State:</b>						<b>Post Code:</b>															
<b>Telephone:</b>	(	0	)																		

### Credit card payment

<b>I wish to pay by:</b>	<b>Visa</b>	<b>MasterCard</b>	<b>Bankcard</b>								
<b>Amount:</b>	\$				-						
<b>Card Number:</b>		/		/		/					
<b>Expiry Date:</b>		/	2	0							
<b>Name on card:</b>											
<b>Account Address:</b>											
<b>Suburb:</b>											
<b>State:</b>			<b>Post Code:</b>								
<b>Signed:</b>				<b>Dated:</b>		/		/	2	0	

## Section 8 – Declaration

I confirm that the above information is a true and accurate statement of eligibility for membership.

I hereby apply for membership with the Aquatic & Recreation Institute (ARI), and agree to abide by the Memorandum of Articles of the Institute as stated in the ARI Constitution.

<b>Signed:</b>		<b>Dated:</b>		/		/	2	0	
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