



- I want to join NTEU
 I am currently a member & wish to update my details

PLEASE COMPLETE ALL SECTIONS. Information on this form is needed for aspects of NTEU's work. Privacy statement: nteu.org.au/privacy

A YOUR PERSONAL DETAILS

TITLE _____ SURNAME _____

GIVEN NAMES _____

HOME ADDRESS _____

SUBURB _____ STATE _____ POSTCODE _____

DATE OF BIRTH ____/____/____ MALE FEMALE NON-BINARY

WORK PHONE INCL AREA CODE _____

MOBILE PHONE OR HOME PHONE _____

WORK EMAIL _____

OTHER EMAIL _____

HAVE YOU PREVIOUSLY BEEN AN NTEU MEMBER?
 YES. AT WHICH INSTITUTION? _____

ARE YOU AUSTRALIAN ABORIGINAL OR TORRES STRAIT ISLANDER? YES NO

USE MY HOME ADDRESS FOR ALL MAILING

B YOUR EMPLOYMENT DETAILS

INSTITUTION/EMPLOYER _____

CAMPUS _____

FACULTY/COLLEGE _____

DEPT/SCHOOL _____

MAIL CODE/BLDG CODE INCL ROOM NO. _____

POSITION _____

CLASSIFICATION LEVEL EG: LECTB, HEW4 _____ GROSS ANNUAL SALARY FULL TIME EQUIVALENT _____

STEP/INCREMENT _____ MONTH NEXT INCREMENT DUE IF KNOWN _____

YOUR EMPLOYMENT GROUP

GENERAL/PROFESSIONAL STAFF

RESEARCH ONLY

OTHER: _____

ACADEMIC STAFF

TEACHING & RESEARCH

RESEARCH ONLY

TEACHING INTENSIVE

C YOUR EMPLOYMENT CATEGORY & TERM CHOOSE ONE ONLY

FULL TIME

PART TIME
HR PER WK OR FRACTION (EG: 0.6) _____

FIXED TERM CONTRACT
DATE OF EXPIRY _____

CASUAL/SESSIONAL

CASUAL/SESSIONAL: INDICATE ANNUAL SALARY RANGE

Under \$20,000
 \$20,000–\$29,999
 \$30,000–\$49,999
 \$50,000 or more

MEMBERSHIP FEES

FEES = 1% GROSS ANNUAL SALARY except for casuals/sessionals – see below

CASUAL/SESSIONAL MEMBERSHIP FEES

Fees are based on estimated annual salary range as indicated in Section C, at left

Annual salary range	Monthly	Quarterly	Half-Yearly	Annual
Under \$20,000	\$8.67	\$26	\$52	\$104
\$20,000–\$29,999	\$13	\$39	\$78	\$156
\$30,000–\$49,999	\$17.33	\$52	\$104	\$208
\$50,000 or more	\$21.67	\$65	\$130	\$260

Members are required to pay dues and levies as set by the Union from time to time in accordance with NTEU Rules. Casual/sessional rates are adjusted in March each year. Further information on financial obligations, including a copy of the NTEU Rules, is available from your Branch or at www.nteu.org.au/rules.

D PAYMENT METHOD CHOOSE ONE ONLY

FULL TIME, PART TIME, FIXED TERM CONTRACT: CHOOSE EITHER **1** **2** OR **3**

CASUAL/SESSIONAL: CHOOSE EITHER **2** OR **3**

Office use only: Membership no. _____

ALL SMALL PRINT ON THIS FORM IS REPRODUCED AT NTEU.ORG.AU/JOIN/SMALL_PRINT

1 PAYROLL DEDUCTION AUTHORITY NOT AVAILABLE TO CASUAL/SESSIONAL MEMBERS

I INSERT YOUR NAME _____ STAFF PAYROLL NO. IF KNOWN _____

OF YOUR ADDRESS _____ HEREBY AUTHORISE INSTITUTION _____

SIGNATURE _____ DATE _____

I hereby authorise the Institution or its duly authorised servants and agents to deduct from my salary by regular instalments, dues and levies (as determined from time to time by the Union), to NTEU or its authorised agents. All payments on my behalf and in accordance with this authority shall be deemed to be payments by me personally. This authority shall remain in force until revoked by me in writing. I also consent to my employer supplying NTEU with updated information relating to my employment status.

2 DIRECT DEBIT AVAILABLE TO ALL MEMBERS Processed on the 15th of the month or following working day

I INSERT YOUR NAME _____ FINANCIAL INSTITUTION _____

BSB _____ ACCT NO. _____ BRANCH NAME & ADDRESS _____

ACCOUNT NAME _____

SIGNATURE _____ DATE _____

MONTHLY QUARTERLY
 HALF-YEARLY ANNUALLY

5% DISCOUNT FOR ANNUAL DIRECT DEBIT

I hereby authorise the National Tertiary Education Union (NTEU) APCA User ID No.062604 to arrange for funds to be debited from my/our account at the financial institution identified and in accordance with the terms described in the Direct Debit Request (DDR) Service Agreement. Full text of DDR at www.nteu.org.au/ddr

3 CREDIT CARD AVAILABLE TO ALL MEMBERS Processed on the 16th of the month or following working day

NAME ON CARD _____ MASTERCARD VISA

CARD NO. _____ EXPIRY ____/____

SIGNATURE _____ DATE _____

MONTHLY
 QUARTERLY
 HALF-YEARLY
 ANNUALLY

I hereby authorise the Merchant to debit my Card account with the amount and at intervals specified above and in the event of any change in the charges for these goods/services to alter the amount from the appropriate date in accordance with such change. This authority shall stand, in respect of the above specified Card and in respect of any Card issued to me in renewal or replacement thereof, until I notify the Merchant in writing of its cancellation. Standing Authority for Recurrent Periodic Payment by Credit Card.

You may resign by email (national@nteu.org.au) or by written notice to your Division or Branch Secretary. Where you cease to be an eligible member, resignation shall take effect on the date the notice is received or on the day specified in your notice, whichever is later. In any other case, you must give at least two weeks notice.

FOR ASSISTANCE IN COMPLETING THIS FORM, PLEASE CALL **03 9254 1910**

E MEMBERSHIP DECLARATION PLEASE SIGN & DATE

I HEREBY APPLY FOR MEMBERSHIP OF NTEU, ANY BRANCH & ANY ASSOCIATED BODY ESTABLISHED AT MY WORKPLACE

SIGNATURE _____ DATE _____

F SCAN & EMAIL TO:

national@nteu.org.au

JOIN ONLINE AT
NTEU.ORG.AU/JOIN

National Tertiary Education Union, National Office
 PO Box 1323, South Melbourne VIC 3205 Australia
 ph 03 9254 1910 • fax 03 9254 1915

OR POST TO:

NTEU National Office
 PO Box 1323,
 South Melbourne
 VIC 3205