

# Italian Didactic Centre of SA Inc



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## RESOURCE CENTRE MEMBERSHIP FORM (SCHOOLS)

### MEMBERSHIP TYPE (PLEASE TICK J)

New Membership  Renewal - Membership Number: B IDCI \_\_\_\_\_

### SCHOOL DETAILS

Name of School: \_\_\_\_\_

Site Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Contact Details:

(Tel) \_\_\_\_\_ (Fax) \_\_\_\_\_

(Email) \_\_\_\_\_

Main Contact Person: \_\_\_\_\_

Contact Details: (Mob) \_\_\_\_\_ (Email) \_\_\_\_\_

### OTHER USERS OF THIS MEMBERSHIP DETAILS

(Please complete the following section for each person to be covered under this membership.)

Full Name	Contact Details	
1.	Tel:	Email:
2.	Tel:	Email:
3.	Tel:	Email:
4.	Tel:	Email:
5.	Tel:	Email:

### PAYMENT DETAILS

Membership Fees: \$35.00 per annum (Please note that the fees are payable by cash, cheque or money order by the person applying, alternatively a Tax Invoice may be sent to the School.) Please make cheques or money orders payable to the Italian Didactic Centre of SA Inc.

### DISCLAIMER (PLEASE SIGN & DATE BELOW)

By use of this membership you agree to be bound by the Terms and Conditions and all future amendments as advised by the Italian Didactic Centre of SA Inc. Membership fees are payable per annum per applicant. Please show staff current identification (Driver's Licence, Passport or Proof of Age Card) upon submission of this application.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### OFFICE USE ONLY

Paid on: ____/____/____	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Money Order
Membership Barcode Number: B IDCI	