

**APPLICATION FOR ASSOCIATE  
A OR B MEMBERSHIP**



**Associate A Members** are any person, firm or body corporate or franchise who are directly engaged in an approved childcare centre.

**Associate B Members** are any person, organisation or body who is associated with the childcare industry.

Please note Associate A and B Members do not have the right to vote or to stand for office. Membership is for a financial year.

**APPLICANTS DETAILS** (correspondence will be sent to these contact details)

Applicants Name .....  
Postal Address .....  
Suburb ..... State/Territory..... Postcode.....  
Phone ..... Mobile .....  
Email.....  
Website .....

**BODY CORPORATE DETAILS** (if applicable)

Body Corporate Name.....  
Trading Name .....  
ABN .....  
Suburb ..... State/Territory..... Postcode.....  
Phone ..... Mobile .....  
Email .....

Please provide information about yourself/organisation and why you wish to join Australian Childcare Alliance SA. (attach another sheet if required)

**PRIVACY**

Information provided on this application will be received, retained, used and disclosed by ACASA for the purpose of maintaining membership records.

*Please note an invoice will be issued for membership fees.*

Return this Application Form to Australian Childcare Alliance SA C/- 131A Morphett Road Morphettville SA 5043 or email to [sa@childcarealliance.org.au](mailto:sa@childcarealliance.org.au)

I/We hereby apply for Associate A  OR Associate B  Membership of Australian Childcare Alliance SA Inc.

Name .....Signed .....Date.....