



Children Australia Inc. ABN 90 680 959 928
(operating as **Oz Child**)

Application Form

Contact Details

Name _____

Position Title _____

Company Name _____

Company Address _____

[Street address]

[City]

[State]

[Postcode]

Ph: () _____

Mobile _____

[Contact Number (B/H)]

[Contact Number (Other)]

Email Address _____

ABN _____

ACN _____

No. of Employees _____

Industry Type _____

I would like to network with the following industry types:

I am interested in the following Events:

Corporate Recreational Industry
Networking Events

Personal information obtained by Oz Child is handled in accordance with the Privacy Act and Oz Child's privacy policy. The PRIVACY POLICY can be viewed at Oz Child's website: www.ozchild.org.au

\$1,100.00 (GST Inclusive) entitles you to membership of Oz Child Unite for a period of 12 months ("term") from receipt of your payment (subject to terms and conditions over page). The application form upon payment becomes a tax invoice.

See over for payment details, Privileges of Membership and Terms and Conditions ...

