



AMA QUEENSLAND PRACTICE MANAGER AFFILIATE

YES JOIN ME UP!

HOW TO APPLY

- ▶ Complete this form and send to PO Box 123, Red Hill Q 4059
- ▶ Call our friendly Membership team on (07) 3872 2222
- ▶ Email this form to membership@amaq.com.au

CONTACT DETAILS: (Please print BLOCK LETTERS in blue/black ink)

Prefix: _____ First Name: _____ Last Name: _____

Gender: Male Female Date of birth: ____ / ____ / ____

Postal/home address: _____

Suburb: _____ State: _____ Postcode: _____

Home phone: _____ Mobile: _____

Email: _____

PRINCIPAL PRACTICE ADDRESS:

Practice Name: _____

Principal practice address: _____

Suburb: _____ State: _____ Postcode: _____

Preferred mailing address: Home Business

PRACTICE MANAGER AFFILIATE FEE:

\$65.00 per year or part there of

Subscription runs 1 January to 31 December

PAYMENT DETAILS:

Amex Visa MasterCard

Card number:

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

Expiry date: ____ / ____ Amount \$ _____

I authorise and request AMA Queensland to debit the above nominated credit card upon receipt of this authorisation and thereafter if nominated above yearly I acknowledge this is a perpetual authorisation and will remain in force until cancelled in writing. In the event that my application for membership is not approved AMA Queensland will refund any subscription amount paid.

Cardholder's name: _____

Signature: _____

WERE YOU REFERRED BY AN AMA MEMBER OR PRACTICE MANAGER AFFILIATE:

Yes No

Name: _____

WHAT HAPPENS NEXT?

Upon receipt of your application, your payment will be processed and AMA Queensland will process approval of your subscription. Once approved you will receive a confirmation and welcome to AMA Queensland.

I declare that the information provided on this subscription application form is true and correct.

Signature: _____ Date: ____ / ____ / ____



Practice managers can now personally connect with our organisations via our Practice Manager Affiliate.

You will:

- ▶ be able to use the post nominal - PMA of AMA Queensland;
- ▶ receive up to 33% off rates to all our conferences and events;
- ▶ stay up-to-date with our monthly PMA newsletter; and
- ▶ receive an affiliate certificate each year.

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REFER AN AFFILIATE

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TO REGISTER

Simply email your application form (on reversed side) to membership@amaq.com.au or call us on (07) 3872 2222.

If your practice subscribes to the new Workplace Relations Advisory Service, your affiliation will be complimentary.