

FEAL Membership Application Form



Name: _____

Position: _____

Organisation: _____

Type of Fund: Corporate Fund Public Sector Fund Industry Fund
 Other (please specify)

Postal address: _____

Phone: _____

Email: _____

Membership Category

Individual Member <i>Covers one executive employee</i>	\$825 (incl. GST)
Corporate Member <i>Covers all executive employees (Funds with under 100 employees)</i>	\$5,445 (incl. GST)
Corporate Member <i>Covers all executive employees (Funds with over 100 employees)</i>	\$8,250 (incl. GST)

Preferred Method of Payment

Card Type: Mastercard Visa Amex

Please note that credit card payments will incur a 1.5% fee.

Card Number: _____

Card Holder: _____

Expiry Date: _____ **Amex ID:** _____

Signature: _____

Date: _____

EFT *(Please reference member's name when making payment)*

Cheque *(payable to Fund Executives Association Ltd)*

Please invoice separately

ANZ Macquarie Place Branch
BSB: 012-110
Account Name: Fund Executives Association Ltd
Account Number: 108960847

Fund Executives Association Limited

ACN 086 016 131

Suite 319, 160 Castlereagh Street | Tel. 02 261 5155 | www.feal.asn.au