

Association of Massage Therapists Ltd

PO Box 826 Broadway NSW 2007

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ABN 32 001 859 285

Community Membership of AMT

Application fee \$20.00 Annual fee \$55.00

Thank you for your interest in taking out Community membership with AMT.

This category of membership has been specifically designed for those who would like to keep abreast of current industry issues in Australia e.g. retired or non-active AMT professional members, overseas registered therapists, non-practising partners of an AMT professional member, and members of the public interested in supporting AMT.

Unlike other levels of membership within AMT, Community Membership has no entry requirements. Consequently, you may benefit from many AMT membership privileges without having gained specific Massage Therapy qualifications.

Massage therapists who are planning to retire or take some time out from their practice may find Community membership a natural succession from AMT's practitioner levels of membership. However, you will be required to return your Membership Certificate and Code of Ethics.

Should you choose to return to active clinical practice, your previous level of membership can easily be reinstated and you will be issued with a new membership Certificate. Community members may not hold office or vote but you can assist or serve on AMT Committees.

Advantages include:

- attend AMT events at membership rates
- assist or serve on AMT Committees
- receive regular updates, newsletters and emails
- interact with colleagues, friends and acquaintances in the massage therapy profession via the association.

Please be aware that Community membership is a non-practising class of membership - you are not eligible for referrals and we cannot endorse you as a health fund provider.

PLEASE COMPLETE DETAILS OVER PAGE, INCLUDING PAYMENT DETAILS.

Community Membership of AMT Application Form



PLEASE COMPLETE IN BLOCK LETTERS ALL QUESTIONS MARKED WITH A * MUST BE COMPLETED

PERSONAL DETAILS:		
*First name:		
*Surname:		
*Date of birth:	Male:	Female:
*Mailing address [†] :		
*State:	*Post Code:	
†please nominate an Australian address where possible		
CONTACT NUMBERS:		
*Home: () *Work: ()	*Mobile:	
*Email address:		
Would you like to receive regular news and important updates via ema	ail? YES NO	
Would you like to subscribe to the AMT Blog? YES NO		
PAYMENT DETAILS:		
Please debit my Visa / Mastercard in the amount of \$		
Name on Card:		
Signature:		
Card number:	Expiry date:	/
Card Verification Number (3 digit number on back of card)		

EFT PAYMENT DETAILS

PLEASE USE YOUR NAME UNDER THE TRANSACTION DESCRIPTION SO WE CAN IDENTIFY THE PAYMENT AND SEND THIS FORM BACK TO AMT Account Name: Association of Massage Therapists Ltd BSB: 062-212

Account Number: 1034-0221

Please return to: AMT, PO Box 826 Broadway NSW 2007 or email info@amt.org.au