



Membership Renewal and Tax Invoice

ABN: 50 515 216 820

1 July 2011 – 30 June 2012

The Alcohol Tobacco and Other Drug Association ACT (ATODA) is the peak body representing the alcohol, tobacco and other drug sector in the Australian Capital Territory (ACT). ATODA seeks to promote health through the prevention and reduction of the harms associated with ATOD.

ATODA works collaboratively to provide expertise and leadership in the areas of social policy, sector and workforce development, research, coordination, partnerships, communication, information and resources. ATODA is an evidence informed organisation that is committed to the principles of public health, human rights and social justice. For further information visit www.atoda.org.au.

As a peak body, two key roles of ATODA are to:

- Ensure that individuals affected by the harms from alcohol, tobacco and other drugs, and the organisations that support them, are well supported and represented in policy and program development and public discussion; and
- Programs, services and workers have the necessary capacity and resources to provide support to members of the community affected by alcohol, tobacco and other drug issues.

1. Members Details

Organisation (if applicable):
Website:
Address:
Postal Address:
Phone:
Fax:
Email:*

**This email address will be the primary address used for correspondence within a member organisation.*

Member Delegate 1 Contact Details¹

Name:
Email:

Member Delegate 2 Contact Details (note: full members are able to have two delegates)

Name:
Email:

¹ Delegate contact details should be those of the nominee(s) who holds voting rights on behalf of the organisation.

2. Membership Description (Please select the category of membership to calculate the annual membership fee)

Membership fees are based on revenue level for organisations and income level for individuals.

Membership type	Membership fee (GST inclusive) ²	Please Tick (if applicable)
Full membership		
< \$10,000	\$30	
\$10,000 - \$50,000	\$60	
\$50,000 - \$100,000	\$120	
\$100,000 - \$500,000	\$240	
\$500,000 – \$1 million	\$360	
> \$1 million	\$500	
Associate Membership	\$240	
Individual Membership³		
Concession ⁴	\$20	
< \$40,000	\$40	
> \$40,000	\$80	
TOTAL		

I / my organisation support the aims and objectives of the Alcohol Tobacco and Other Drug Association ACT Inc and enclose a cheque / money order or deposited EFT for annual membership.

Signed: _____ **Date:** _____

3. Payment Options and Details

Please post, email or fax this completed membership renewal with a cheque or money order made payable to the Alcohol Tobacco and Other Drug Association ACT or for EFT please provide a name on the transfer details.

Please tick one	<input type="checkbox"/> cheque <input type="checkbox"/> electronic funds transfer (EFT) <input type="checkbox"/> cash <input type="checkbox"/> money order
ATODA Bank Details	BSB: 633000 Account Number: 140237066 <i>Please provide your / your organisation's name on the transfer description</i>

Please return this completed renewal form to:

Alcohol Tobacco and Other Drug Association ACT Inc
 Address: 350 Antill St., Watson Post: PO BOX 7187 Watson ACT 2612 Email: accounts@atoda.org.au
 Phone: (02) 6255 4070 Fax: (02) 6255 4649

² **Pro-rata Rates:** ATODA membership is for a fixed period of a financial, 1 July – 30 June. Membership applications received between 1 January and 30 June are invoiced on a pro-rata basis, meaning you will only be invoiced for the part of the financial year you are a member. ATODA will request a membership renewal in July.

³ Individuals must be 18 years of age or older.

⁴ Concession equates to an individual's income which is less than \$40,000 per year.