

Office Use Only 19-20

Payroll _____
 CRM _____
 Website _____
 Welcome _____
 Member No. _____



Western Australian Railways Institute (WARI) Application for Membership

for Full Time/Part Time Employees
of **ARC INFRASTRUCTURE**

I, _____
 [Title] [First Name] [Last Name] [Preferred Name] [if applicable]
 an employee of **ARC Infrastructure**, hereby apply to be admitted as a member of the WA Railways Institute (WARI), and agree to pay out of my salary or wages each pay period the amount of my subscription (**currently \$5.21 per fortnight**) to WARI. I understand and acknowledge that the amount of the subscription to WARI is that provided for the Constitution as amended by WARI Council from time to time.

Signature		Date	/ /
Service Number		Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>
Position Title			
Location			
Date of Birth	/ /	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Postal Address			
Suburb		Post Code	
Home Phone		Mobile	
Email			

Please return your completed membership form to WARI:

Post PO Box 8436, Perth Business Centre WA 6849
 In Person Public Transport Centre, West Parade, East Perth, WA 6004
 Fax 9326 2754
 Email wari@wari.asn.au

For membership enquiries:

Membership Officer
 Phone 9326 2462
 Email wari@wari.asn.au