Office Use Only	19-20
Payroll	❒ _____
CRM	❒ _____
Website	❒ _____
Welcome	❒ _____
Member No.	_____
Invoice No.	_____

Western Australian Railways Institute (WARI)
Application for Membership

for Full Time/Part Time Employees of **Serco, Transperth**

I, _____ _____
[Title] **[First Name]** **[Last Name]** **[Preferred Name]** [if applicable]

an employee of **Serco, Transperth**, hereby apply to be admitted as a member of the WA Railways Institute (WARI), and agree to pay out of salary/wages each pay period the amount of subscription (**currently $5.21 per fortnight or $11.29 per month**) to WARI. I understand and acknowledge that the amount of the subscription to WARI is amended by WARI Council annually.

Employee ID Number		**Employed**	Full Time ❒ Part Time ❒	**WARI Membership Payment Cycle Requested** (Please Tick)	Weekly ❒ Fortnightly ❒ Monthly ❒ Annually* ❒
Signature			**Date**	/ /	
Position Title					
Division			**Location**		
Date of Birth	/ /		**Gender**	Male ❒ Female ❒	
Postal Address					
Suburb				**Post Code**	
Home Phone		**Mobile**			
Email					

***Please Note:** Employees who request to pay WARI Membership Annually will receive an Invoice direct from WARI for the full amount of the cost of membership due at the time of application.

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