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**Public Transport
Authority**



Western Australian Railways Institute (WARI) Application for Membership

for Full Time/Part Time Employees
of the **PUBLIC TRANSPORT AUTHORITY**

I, _____
 [Title] [First Name] [Last Name]

an employee of **Public Transport Authority**, 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**) to WARI. I understand and acknowledge that the amount of the subscription to WARI is amended by WARI Council annually.

Signature		Date	/ /
Service Number		Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>
Position Title			
Division <small>(e.g. Transperth Train Operations)</small>		Location <small>(e.g. Claisebrook)</small>	
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