



ALAEA Membership Update Form

Phone:02 9554 9399 Fax:02 9554 9644 Email: alaea@alaea.asn.au

Member Number: _____ **Date:** _____

First Name: _____

Surname: _____

Postal Address: _____

Suburb: _____

State: _____ **Postcode:** _____

Home Phone: _____ **Mobile:** _____

Home Email: _____ (Receive notices etc personally by email)

Beneficiary: _____ **Relationship:** _____

Employer: _____

Work Area/location: _____

Licence No: _____ **Category:** A/F, ENG,EIR _____

Ratings/Approvals: _____

Classification: (LAME/AME, SNR LAME,DMM, etc) _____

Automatic Direct Debt: Name if Member(s) giving the DDR _____
I/We _____

Authorise the Australian Licenced Aircraft Engineers Association, APCA User ID Number 066017, to arrange for funds to be debited from my/our account at the financial institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS). This authorisation is to remain in force in accordance with the terms described in the Australian Licenced Engineers DDR Service Agreement.

Signature: _____ Date: _____

Signature: _____ Date: _____

Name of the Financial Institution: _____

Bank Account Name: _____

BSB Number: _____

Account Number: _____

Frequency: Weekly F/nightly Monthly

Quarterly Half Yearly Annually

Automatic Credit Card Frequency: Monthly Quarterly Half Yearly

Annually

Type of Card: Visa MasterCard

Name on Card: _____

Card Number: _____

Expiry Date: _____

Signature: _____ Date: _____

