



# The Modern Language Teachers' Association of Queensland Inc.

Affiliated with the Australian and International Federations of Modern Language Teachers' Associations (AFMLTA & FIPLV)  
 PO Box 3727  
 South Brisbane BC  
 QLD 4101  
[www.mltaq.asn.au](http://www.mltaq.asn.au)  
 ABN 11 338 967 805

## MEMBERSHIP APPLICATION 2010 - TAX INVOICE (Prices include GST)

(This form becomes a Tax Invoice after payment is received.)

Renewal  New Membership

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Please complete the form below and post this application (or a copy) AND appropriate fees to:  
 MLTAQ Inc. - MEMBERSHIP REGISTRAR or FAX to 3844 8922 or EMAIL [membership@mltaq.asn.au](mailto:membership@mltaq.asn.au)

### Categories of Membership and Subscription rates

(Membership applies per calendar year)

<input type="checkbox"/>	Individual Membership**	\$70	(\$65.00 if paid before 1 March 2010)
<input type="checkbox"/>	Full-time student**	\$40	University : _____ Student no: _____
<input type="checkbox"/>	Overseas Membership**	\$110	
<input type="checkbox"/>	MLTAQ Journal only*	\$35	(No need to complete page two)
<input type="checkbox"/>	Corporate membership# (without Babel)	\$160	(with Babel – add \$25) (No need to complete page two)

\*Subscription to the MLTAQ Journal only does NOT make you are a member of the MLTAQ and does NOT entitle you to discount for MLTAQ functions.

\*\*includes Babel, MLTAQ Journal & LinQ

# Corporate membership is intended for institutions such as publishers etc (NOT including schools) and entitles the member institution to two half page B & W advertisements per year in either the LinQ or MLTAQ Journal in addition to the receipt of publications. For further information please email [membership@mltaq.asn.au](mailto:membership@mltaq.asn.au)

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### NAME:

\_\_\_\_\_ (Title) (Given Name) (Family Name)

CONTACT DETAILS: Please mail to my Business  OR Home  address.

(Please include your school name even if you wish mail to go to your home address.)

<b>School/Business</b>  <b>Postal address:</b>  <b>Postcode:</b> <b>Phone:</b> <b>Fax:</b>  <b>Email:</b>	<b>Home</b> <b>Postal address:</b>  <b>Postcode:</b> <b>Phone:</b> <b>Fax:</b>  <b>Email:</b>
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### Payment by (please tick):

Cash   
  Cheque   
  Money order   
  Bankcard   
  Mastercard   
  Visa   
  Direct Deposit  
 See details on P 2

<b>CREDIT CARD</b> Name on Card: _____  Card Number: _____  Amount paid: \$ _____    Expiry date: _____  Signature: _____	<b>DIRECT DEPOSIT</b> Account Name – MLTAQ Inc BSB – 084-150 Account No – 20 510 1227 Reference – Member + your surname or school name <b>NOTE</b> You MUST send/fax a copy of the transaction report with your membership form.
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**MLTAQ Inc. MEMBERSHIP DETAILS**

The following information is collected to determine statistical data to assist in branch and network capitation and for planning purposes. You do not need to indicate a Branch affiliation.

<p><b>LANGUAGE/S CURRENTLY TEACHING: (please tick)</b></p> <input type="checkbox"/> Chinese <input type="checkbox"/> French <input type="checkbox"/> German <input type="checkbox"/> Indonesian <input type="checkbox"/> Italian <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Latin <input type="checkbox"/> Modern Greek <input type="checkbox"/> Russian <input type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other – please specify	<p><b>OTHER LANGUAGE/S OF INTEREST TO YOU:</b></p> <input type="checkbox"/> Chinese <input type="checkbox"/> French <input type="checkbox"/> German <input type="checkbox"/> Indonesian <input type="checkbox"/> Italian <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Latin <input type="checkbox"/> Modern Greek <input type="checkbox"/> Russian <input type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other – please specify	<p><b>AGE BRACKET (please tick)#</b></p> <input type="checkbox"/> 18-30 <input type="checkbox"/> 30-40 <input type="checkbox"/> 40-50 <input type="checkbox"/> 50-60 <input type="checkbox"/> 60-70 <input type="checkbox"/> 70+ # not compulsory but requested
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<p><b>EMPLOYMENT (if not student):</b></p> <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual/Supply/Contract <input type="checkbox"/> Currently Unemployed <input type="checkbox"/> Self employed <input type="checkbox"/> Retired <input type="checkbox"/> On leave <input type="checkbox"/> Other – please specify	<p><b>LANGUAGE TEACHING EXPERIENCE: (tick ONE) *</b></p> <input type="checkbox"/> 0 – Student (full-time)** <input type="checkbox"/> 1 to 5 yrs <input type="checkbox"/> 5-10 yrs <input type="checkbox"/> 10-15 yrs <input type="checkbox"/> 15-20 yrs <input type="checkbox"/> 20-25 yrs <input type="checkbox"/> 25 -30 yrs <input type="checkbox"/> 30 yrs + * the length of time you have been teaching language(s)
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<p><b>MAJOR ROLE: (indicate your MAIN role)</b></p> <input type="checkbox"/> Teacher – Early Childhood <input type="checkbox"/> Teacher –Primary <input type="checkbox"/> Teacher – Secondary <input type="checkbox"/> Teacher – Primary/secondary <input type="checkbox"/> Teacher – Tertiary / TAFE <input type="checkbox"/> Researcher	<input type="checkbox"/> Teacher Educator <input type="checkbox"/> Consultant/Advisor <input type="checkbox"/> Administration <input type="checkbox"/> Publisher <input type="checkbox"/> Other – please specify	<p><b>SYSTEM (if teaching):</b></p> <input type="checkbox"/> Government <input type="checkbox"/> Independent <input type="checkbox"/> Catholic <input type="checkbox"/> Other (please specify)
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<p><b>Post this form (or a copy) AND appropriate fees to:</b></p> <p><b>MLTAQ Inc. - MEMBERSHIP REGISTRAR          PO BOX 3727          SOUTH BRISBANE BC QLD 4101</b></p>	<p><b>(Or FAX to 3844 8922 – Cover sheet NOT required)</b></p> <p><b>Please note this is a HOME fax. Do not fax after 10.00pm or before 7.00am.</b>  <b>Or email to: <a href="mailto:membership@mltaq.asn.au">membership@mltaq.asn.au</a></b></p>
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This information is collected for the use of the MLTAQ and its branches. Personal information will not be disclosed to anyone other than the state or branch executive officers of the MLTAQ unless required or authorised by law.