



VASSP
 Victorian
 Association
 of State
 Secondary
 Principals

Unit 2/13-21 Vale Street
 North Melbourne Vic 3051
 Phone: (03) 9320 7100
 Fax: (03) 9326 8147
 Email: vassp@vassp.org.au

APPLICATION FOR MEMBERSHIP
TAX INVOICE

I hereby apply for membership of the Professional Association:

THE VICTORIAN ASSOCIATION OF STATE SECONDARY PRINCIPALS (INC.)

ABN: 19 201 080 428

And I undertake to conform with the rules of the Association.

TITLE:.....SURNAME:GIVEN NAMES:

RESIDENTIAL ADDRESS:POSTCODE:

HOME PHONE NO:MOBILE TELEPHONE:.....

DEECD NUMBER: **TO**..... DATE OF BIRTH:

SCHOOL NAME:

SCHOOL ADDRESS:POSTCODE:.....

REGION:EMAIL:

SCHOOL TELEPHONE NO:FAX.....

TITLE/POSITION:CLASSIFICATION:

SIGNATURE:**DATE:**

PAYMENT METHODS:

VASSP membership fee is \$540.80 inclusive of GST per year or \$20.80 per fortnight.

Payment Options: Please choose **one** payment option only

- Cheque payable to VASSP
- DEECD Payroll Deduction - \$20.80 per fortnight (please complete DEECD Payroll Deduction form below)
- Smart Salary Packaging: Contact Smart Salary on 1 300 550 056

REMINDER: If you have been paying by Payroll Deduction or Smart Salary, remember to adjust/cancel your previous arrangements.

DEECD Payroll Deduction

PAYMENT: **VASSP: \$540.80 pa (\$20.80 per fortnight) inc. GST**

Schools' Human Resources Unit
 DEECD
 GPO Box 4367
 Melbourne 3001



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Date:

Dear Sir,

I hereby authorise deductions from my salary in favour of the: VICTORIAN ASSOCIATION OF STATE SECONDARY PRINCIPALS (INC.). I request that the deductions operate from the earliest possible date.

NAME:SIGNATURE.....

DEECD Number: TO.....School Name:School No: