

MEMBERSHIP FORM

JOIN CARERS VICTORIA TODAY - IT'S FREE

When you become a member of Carers Victoria, you join thousands of other carers in our community. Carers Victoria provides support, services, advice and counselling to our members. We advocate on behalf of carers in policy planning, including direct advice to government. We offer exclusive member benefits, invitations to carer events and forums and up-to-date information to help you in your caring journey.

With a 7,000+ strong membership base, we work for greater recognition for carers across Victoria. Join our cause today and have your say in shaping the future of Victorian carers.

I WOULD LIKE TO BECOME A MEMBER OF CARERS VICTORIA

I support the purposes of Carers Victoria and agree to comply with its Constitution and Regulations and I consent to the collection and use of my information for official purposes.

Please tick the box that applies

am a carer	l am a [.]	former carer
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ABOUT YOU Title First name Last name Postal address Postcode Preferred phone number **Email** How did you hear about Carers Victoria? What language do you speak at home? Do you require an interpreter? Yes Nο Do you identify as Aboriginal or Torres Strait Islander? Yes No Carers Victoria members receive all correspondence via email including our Carers News Magazine, monthly Voice ebulletin and promotion for member events. This reduces the costs associated with

I am unable to receive correspondence electronically, please post me AGM and event information.

print and postage and enables us to invest the savings in services to better assist carers.

I would like to subscribe to the print edition of Carer News Magazine at a cost of \$20.00 for three editions (to cover print and postage) - please complete the section overleaf.

I can be contacted occasionally for research purposes.

ABOUT THE PERSON YOU CARE FOR

Name (optional)

Date of birth (optional)

This person is your (e.g. child, partner, friend)

Primary condition/diagnosis

Disability Aged Alcohol or drug issue

Mental illness Chronic condition Other

Where does this person live?

Alone With you With another person

In a nursing home In a residential unit Other

If you care for more than one person, please attach their details on a separate sheet of paper.

WOULD YOU LIKE TO MAKE A DONATION?

Yes, I would like to give a gift to Carers Victoria in the amount of \$ (All gifts of \$2 or more are tax deductible.)

Yes, I would like to subscribe to the print edition of Carer News Magazine at a cost of \$20.00.

My payment is by

Visa Mastercard Cheque (Payable to Carers Victoria) Cash

Card number:

Card expiry date: Name on card:

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You can also find out about our Carer Support Group and Organisational memberships at carersvictoria.org.au

THANK YOU FOR YOUR SUPPORT OF CARERS VICTORIA

All membership applications are reviewed by Carers Victoria's Board Members. You will be advised of the outcome of your application within six weeks.

PRIVACY STATEMENT

Carers Victoria collects information about you, your caring role and the person you care for in order to provide services, understand more about caring situations and to meet the legal obligations of our Constitution and the Government. Your information is securely held in the Carers Victoria database. As a member of Carers Victoria, your name, address, membership number and date of joining are recorded in our membership register, which may be viewed by any member subject to the approval of the Board and any conditions the Board may place on such access. As a member, you will receive information about Carers Victoria's services and supports and other information relevant for carers. Our privacy policy explains how your information is protected and used. For more information, please see Carers Victoria's full Privacy Statement at carersvictoria.org.au.

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