



## The Australasian Association of irlen Consultants

President Mary Temple <a href="mailto:templeclinic@gmail.com">templeclinic@gmail.com</a>	Treasurer Julie Matthews <a href="mailto:j.ann221970@gmail.com">j.ann221970@gmail.com</a>	Secretary Dianne Bevan <a href="mailto:diannebevan@hotmail.com">diannebevan@hotmail.com</a>	Membership Robyn O'Connor <a href="mailto:robyn@edgeucation.com.au">robyn@edgeucation.com.au</a>
--	---	---	--

**Category:** FULL MEMBERSHIP (voting rights)

*Regional Director, Clinic Director, Diagnostician and Allied Members*

Fee: NZD \$74.00

Name \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

**Category:** ASSOCIATE MEMBERSHIP (speaking rights)

*Screeners and Pre-Assessors (PASS)*

Fee: NZD \$37.00

Name \_\_\_\_\_

Category \_\_\_\_\_

Regional/Clinic Director for area you work in \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

**Category:**

HONORARY AND LIFE MEMBERSHIP (by nomination only) Fee: No Fees charged

Membership will be subject to approval by the AAIC. You will be notified of your approval within 28 days. Details about payment will be supplied at this time



AAIC TREASURER'S DELEGATE IN NEW ZEALAND Sarah Bycroft PO Box 303 103 North Harbour  
Auckland Email: [sarah@irlen.nz](mailto:sarah@irlen.nz)

## **Application for Association membership or Renewal and Payment**

Email Form To: Sarah Bycroft  
Secretary Treasurer  
AAIC NZ Chapter  
[Sarah@irlen.nz](mailto:Sarah@irlen.nz)

Payment to be made to: AAIC NZ  
01-0235-0221836-00  
Reference: Your Name

**WE DO NOT ACCEPT CREDIT CARD PAYMENT**