

**RETURN TOGETHER WITH PAYMENT TO:**  
 IIM LTD  
 PO Box 4195 BALWYN EAST VIC 3103  
 Phone +61 3 5424 8551  
 Email iim@iim.org.au Web https://www.iim.org.au

**OFFICE USE ONLY:**  
 M/SHIP NUMBER \_\_\_\_\_  
 DATE \_\_\_\_\_



**INDIVIDUAL OR PRIMARY CORPORATE APPLICANT** (Corporate Applicants - please list your Additional Nominees on reverse side)

SURNAME \_\_\_\_\_

GIVEN NAME/S \_\_\_\_\_

MR/MS/MRS/MISS/OTHER \_\_\_\_\_

POSITION \_\_\_\_\_

ORGANISATION \_\_\_\_\_

POSTAL ADDRESS \_\_\_\_\_

SUBURB \_\_\_\_\_

STATE \_\_\_\_\_

POSTCODE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BUSINESS PHONE NUMBER ( ) \_\_\_\_\_

BUSINESS FAX NUMBER ( ) \_\_\_\_\_

MOBILE PHONE NUMBER \_\_\_\_\_

PRIVATE PHONE NUMBER ( ) \_\_\_\_\_

AFFILIATION WITH OTHER PROFESSIONAL BODIES \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**MEMBERSHIP CATEGORY**

I/We hereby apply for the following Membership Category of IIM Ltd, and enclose my/our subscription fee accordingly.

Membership Type	TOTAL PAYABLE (\$A GST Inclusive)
Individual	\$ 245
Full-time Student* / Retired	\$ 60
Part-time Student*	\$ 95
Limited Corporate User: 3 Nominees	\$ 644
Corporate User: 5 Nominees	\$ 980
Additional Nominee (for Corporate Members who require more than five nominees)	\$ 135
Corporate Vendor Organisation: 5 Nominees	\$ 1,100
SME Vendor: 3 Nominees	\$ 720
SME Vendor: 2 Nominees	\$ 450
Institutional **	\$ 1,100
Enterprise	\$ 2,300

**PAYMENT**

Membership cannot be confirmed until payment of subscription fees is received by IIM Ltd. Payment may be made by cheque payable to IIM Ltd (in Australian Dollars) or any major Credit Cards. If paying by Credit Card, please detail:

CARD TYPE  AMEX  MASTERCARD  VISA \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

EXPIRY DATE \_\_\_\_\_

CARDHOLDER'S NAME  
(AS SHOWN ON CREDIT CARD) \_\_\_\_\_

AMOUNT BEING PAID \$ \_\_\_\_\_

SIGNATURE \_\_\_\_\_

\* Students enrolled in Information Management related courses.  
 \*\* Institutional membership is open to any tertiary institution offering information management related courses.

# APPLICATION FOR MEMBERSHIP INSTITUTE FOR INFORMATION MANAGEMENT LTD

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## CORPORATE APPLICANTS - ADDITIONAL NOMINEES

(PRIMARY NOMINEE TO BE DETAILED ON REVERSE OF THIS PAGE)

### NOMINEE 1

SURNAME \_\_\_\_\_

GIVEN NAME/S \_\_\_\_\_

MR/MS/MRS/MISS/OTHER \_\_\_\_\_

POSITION \_\_\_\_\_

POSTAL ADDRESS  
(IF DIFFERENT TO MAIN CORPORATE ADDRESS) \_\_\_\_\_

SUBURB \_\_\_\_\_

STATE \_\_\_\_\_ POSTCODE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BUSINESS PHONE NUMBER ( ) \_\_\_\_\_

BUSINESS FAX NUMBER ( ) \_\_\_\_\_

MOBILE PHONE NUMBER \_\_\_\_\_

PRIVATE PHONE NUMBER ( ) \_\_\_\_\_

AFFILIATION WITH OTHER PROFESSIONAL BODIES \_\_\_\_\_

### NOMINEE 2

SURNAME \_\_\_\_\_

GIVEN NAME/S \_\_\_\_\_

MR/MS/MRS/MISS/OTHER \_\_\_\_\_

POSITION \_\_\_\_\_

POSTAL ADDRESS  
(IF DIFFERENT TO MAIN CORPORATE ADDRESS) \_\_\_\_\_

SUBURB \_\_\_\_\_

STATE \_\_\_\_\_ POSTCODE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BUSINESS PHONE NUMBER ( ) \_\_\_\_\_

BUSINESS FAX NUMBER ( ) \_\_\_\_\_

MOBILE PHONE NUMBER \_\_\_\_\_

PRIVATE PHONE NUMBER ( ) \_\_\_\_\_

AFFILIATION WITH OTHER PROFESSIONAL BODIES \_\_\_\_\_

## CORPORATE APPLICANTS - ADDITIONAL NOMINEES

(PRIMARY NOMINEE TO BE DETAILED ON REVERSE OF THIS PAGE)

### NOMINEE 3

SURNAME \_\_\_\_\_

GIVEN NAME/S \_\_\_\_\_

MR/MS/MRS/MISS/OTHER \_\_\_\_\_

POSITION \_\_\_\_\_

POSTAL ADDRESS  
(IF DIFFERENT TO MAIN CORPORATE ADDRESS) \_\_\_\_\_

SUBURB \_\_\_\_\_

STATE \_\_\_\_\_ POSTCODE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BUSINESS PHONE NUMBER ( ) \_\_\_\_\_

BUSINESS FAX NUMBER ( ) \_\_\_\_\_

MOBILE PHONE NUMBER \_\_\_\_\_

PRIVATE PHONE NUMBER ( ) \_\_\_\_\_

AFFILIATION WITH OTHER PROFESSIONAL BODIES \_\_\_\_\_

### NOMINEE 4

SURNAME \_\_\_\_\_

GIVEN NAME/S \_\_\_\_\_

MR/MS/MRS/MISS/OTHER \_\_\_\_\_

POSITION \_\_\_\_\_

POSTAL ADDRESS  
(IF DIFFERENT TO MAIN CORPORATE ADDRESS) \_\_\_\_\_

SUBURB \_\_\_\_\_

STATE \_\_\_\_\_ POSTCODE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BUSINESS PHONE NUMBER ( ) \_\_\_\_\_

BUSINESS FAX NUMBER ( ) \_\_\_\_\_

MOBILE PHONE NUMBER \_\_\_\_\_

PRIVATE PHONE NUMBER ( ) \_\_\_\_\_

AFFILIATION WITH OTHER PROFESSIONAL BODIES \_\_\_\_\_