

Kodály Australia

12 Month Membership Form

KMEIA	Date:		New Memb	er 🔛	Renewing Membe	r 🔛
Contact Details	Title: First Name:		Surname:			
	Address:	;				
	State:		Postcode:			
	Mobile:		Phone (work):			
	Email:					
	(news	s and events of the institute,	as well as branch newslet	tters will be	emailed to this address)	
Membership		nary \$70 \Box Fament FREE 123	nily/Corporate \$100		Concession \$40 (Proof of eligibility required)	
	either underg Education, Ma Center, Holy N enrolment mu	part-time or full-time study at raduate or postgraduate ini aster of Teaching). 2 . Applie Names University, USA, and h ust be emailed to membersh mation, refer to our website	tial teacher education (E. s to postgraduate study c has previously been an ord hip@kodaly.org.au within b	.g. Bachelo at the Kodál dinary mem 5 working do	r of Education, Graduate Di _l ly Institute, Hungary, or the K aber of the association. 3 . Pro	ploma of odály oof of
IKS 1	☐ IKS Or	dinary \$50 🔲 IKS In	nstitutional \$50	IKS Stude	ent \$35 🔲 IKS Supp	oorter \$10
DUCK		ralia supports the work of the ollars and it will be forwarded www.iks.hu				
Payment	Cheque/N	Money Order payable	to: Kodály Music Ed	ducation	Institute of Australia I	nc
	(Please	Direct Deposit: BSB e post or email this form with t Card or Paypal (paid	a receipt number as pro	1	ent)	
Branch:	ACT	QLD NSV	V SA VIC		WA	
Work Details	Position:		G	Sovt I	ndep Cath O	ther
	Daycare/School/University:					
Qualifications	<u>Degrees</u>	:				
4	Kodály ⁻	Training:				
Interests	Early C	Childhood Primary	Secondary Tertic	ary Ch	noral Instrumental	
Reconciliation	I'm an Aboriginal or Torres Strait Islander Person Yes No					
	Can we contact you to share your perspective?					
	Do you t	each Indigenous stu	dents?		Yes No	

Forward to

Kodály Australia Membership

PO Box 102

Burpengary QLD 4505

Email: membership@kodaly.org.au

Kodály Music Education Institute of Australia Inc ABN 26 678 344 033