

Special Interest, Student & Retired Membership Application Form

1. Membership Information

Title: Please select

Given Name/s:

Family Name:

Preferred Pronoun: Please select

Origin: Please select

Business/Organisation:

Phone:

Email:

Street address:

City:

State: Please select

Postcode:

2. Membership Class

Please indicate the membership class sought:

Special Interest Member

Student Member

Retired Member

3. Pedorthic Interest

What is your main interest, activity, or involvement with pedorthics?

Please list any education, training, experience, trade or business operations relevant to pedorthics and attach supporting documentation when you submit this form.

1. **Technical Training:**

2. **Clinical Training:**

3. **Clinical Experience:**

4. **Business Experience:**

I hereby apply for membership of the Pedorthic Association of Australia. If accepted, I agree to comply with the [PAA Code of Ethics and Standards](#) and abide by Association rules and constitution.

Applicant signature:

Date:

Membership is available on an individual basis only. Organisations are welcome to be PAA [Sustaining Partners](#). A \$165.00 fee including GST is payable with your application. A pro-rata membership fee less the application fee is payable on approval.