



# ECW

AUSTRALIAN EDUCATION AND CARE WORKFORCE PROFESSIONAL BODY

Services benefit through having informed teams and affordable PD

Return completed form to [membership@aecwpb.com](mailto:membership@aecwpb.com)

tax invoice  
ABN 59612246689

Membership in a Professional Body offers many rewards

[Discover them NOW](#)

## Membership Application Form

At **ECW**, we recognize, acknowledge and value you as an education and care professional. We encourage all education and care practitioners to share their stories of good practice. Recognizing that it is through coming together as one, sharing our stories, reflecting on our practices and engaging in professional discussions, that together we can all grow in knowledge, skill and expertise.

## Service ECW Membership Application

### Member Benefits:

- Association with your peak professional body
- Recognised, acknowledged and valued as a professional
- A voice on issues effecting you and the EC profession
- PRB Voting rights
- Opportunities to showcase your practices
- Kept informed about issues that matter

### Member Rewards:

- FREE networking opportunities
- Heavily discounted Professional Development
- Credits up to \$200 for contributions of Good Practice Stories
- Up to 20% off goods and services through ECW Collaborators
- \$500 off textbooks for studies through Open Universities Australia
- Event Giveaways

*We are still exploring opportunities and rewards that will benefit you and expect this list to grow.*

Service Details		
Name of Service		
Address		
Suburb	State	
Postcode	Phone	
Service Type (circle) LDC FDC Kindergarten/Preschool SAC	Other	
Service Email		
Name authorising officer		Position
Direct Email		
Total No: of staff joining	No: Years of Membership	Total amount payable (+GST)

Payment to be made to:

**Australian Education and Care Workforce Professional Body**  
BSB: 064 149  
ACC: 10151502

Paid by Direct Credit.

Please reference payment with services name and forward this form to:  
[membership@aecwpb.com](mailto:membership@aecwpb.com)

ECW membership is for the Education and Care Practitioner

Name on Card	M/Card <input type="checkbox"/>	Visa <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Expiry	MM / YY
<input type="text"/>	<input type="text"/>	<input type="text"/>
	CCN	<input type="text"/>

“MANY VOICES TOGETHER -  
**ONE STRONG VOICE**  
FOR EDUCATION AND CARE PRACTITIONERS.”

Enquiries to:  
 1300 AEC WPB  
 [WWW.AECWPB.COM](http://WWW.AECWPB.COM)

Staff Details	
1.Full Name	Mobile
Personal Email	Position
2.Full Name	Mobile
Personal Email	Position
3.Full Name	Mobile
Personal Email	Position
4.Full Name	Mobile
Personal Email	Position
5.Full Name	Mobile
Personal Email	Position
6.Full Name	Mobile
Personal Email	Position
7.Full Name	Mobile
Personal Email	Position
8.Full Name	Mobile
Personal Email	Position
9.Full Name	Mobile
Personal Email	Position

Duplicate this page if additional space for staff names is needed.

Complete the table and add totals to the front page.

[www.aecwpb.com](http://www.aecwpb.com)

Number of staff	Number of membership years				Membership rate	Equation	Total Membership Fee
E.g. 6	3 years				\$ 190 each	6 x \$190 =	\$1,140.00
<b>No: of Years</b>	<b>1-4 staff</b>	<b>5-9 staff</b>	<b>10-20 staff</b>	<b>20+ staff</b>	<b>Add GST 10%</b>	<b>\$</b>	114.00
1yr	80	70	60	50			
2yrs	150	140	130	120			
3yrs	200	190	180	170			
5yrs	320	310	300	290			
<b>Amounts are individual per each staff member</b>					<b>Total Payable</b>	<b>\$</b>	1,254.00