



Adolescent and Family Counsellors Association NSW

ABN: 70 181 066 303

AFCA Membership Application Form

To be eligible for **Full Membership** of AFCA you are

- a) Employed as a Counsellor, for adolescents and their families, whether funded by the Department of Family and Community Services or other funding body, AND
- b) Sufficiently qualified in counselling or similar discipline.

Or, as an **Associate Member**

- a) Employed under similar job descriptions, without having yet attained full qualifications for the role.
(eg, student)

Full Members are eligible to vote and hold office, receive AFCA correspondence, attend AFCA annual general meetings.

All members receive discounted training rates, may attend and present at AFCA Conferences and Workshops and may utilise the advocacy of the association (eg. for pursuing further qualifications).

Membership also provides a member's service listing on the AFCA website & participation in regional AFC meetings.

NOTE: All membership applications, including renewals are conditional, subject to acceptance by the AFCA Executive Committee.

Name: _____ Current Position: _____

Employer: _____

Address: _____

Phone: _____ Email: _____

New applicants please attach:

- resume
- copy of your job description.

Membership fees

Membership fees are due on the 1st July annually.

The membership fees are payable as follows:

- \$65.00 per person for full member
- \$50.00 per person for associate members
- \$25.00 for additional financial members (beyond the second) from a single service.
- These fees are non-refundable or transferrable.

I agree to uphold the A.F.C.A. Code of Ethics and Constitution (available for review at www.afcansw.asn.au).

Signed: _____ Date: _____

Amount Paid: \$..... (This is a receipt upon payment).

Please make payment to AFCA NSW direct to St George Bank BSB 112 879 Account 043482142 and Email confirmation to membership@afcansw.asn.au.