



*Corporate Industry Partners*

**CIP**

# Benchmarking • Networking • Education

IICA Corporate Industry Partner (CIP) Membership offers three Membership options:

<b>Level ONE - Small Companies &amp; Tertiary Education Institutions</b>	<b>(GST Inclusive) \$450.00</b>
Up to 10 employees OR Tertiary Education Institutions <ul style="list-style-type: none"><li>• Includes TWO full Individual Memberships</li><li>• Up to five additional persons attending any IICA event at the Member rate</li></ul>	
<b>Level TWO - Mid Sized Companies</b>	<b>\$850.00</b>
11 - 50 employees <ul style="list-style-type: none"><li>• Includes FOUR full Individual Memberships</li><li>• Up to 10 additional persons attending any IICA event at the Member rate</li></ul>	
<b>Level THREE - Large Companies</b>	<b>\$1200.00</b>
50+ employees OR Geographic Business Units of large companies <ul style="list-style-type: none"><li>• Includes SIX full Individual Memberships</li><li>• Up to 15 additional persons attending any IICA event at the Member rate</li><li>• Any further Members added to Level THREE CIP Membership will be at Individual Membership rate, less 20%</li></ul>	

If a CIP Company has a number of geographic areas where it has stand alone Company Branches, each of those Branches may choose to take out the appropriate CIP Member Level depending on its size.

---

## **IICA CIP Member benefits**

- Listing on IICA website with link to your website
- Opportunity to list your training courses on IICA website (free listing) and add your training courses to the IICA Education Bulletin (small charge)
- Discounted Technology Expo bookings and CIP Member only Sponsorships
- Discounted registrations to attend IICA Events
- Company logo inclusion on IICA Corporate Partner Banner displayed at all IICA Events
- Expand knowledge - stay up-to-date with the fast-changing world of technology
- Network with other like-minded Professionals

**Can you afford NOT to be  
a IICA CIP Member?**





# CIP Application Form

TAX INVOICE ABN: 70 901 535 539

Company / Organisation Name .....

Address .....

..... State ..... Postcode .....

### Our company wishes to apply for the following CIP Membership Level:

- Level ONE - Please fill out TWO Members details below
- Level TWO - Please fill out FOUR Members details below
- Level THREE - Please fill out SIX Members details below

### Level ONE Membership

**FIRST** person nominated for Membership .....

Telephone ..... Mobile ..... Email .....

Address .....

**SECOND** person nominated for Membership .....

Telephone ..... Mobile ..... Email .....

Address .....

### Level TWO Membership

**THIRD** person nominated for Membership .....

Telephone ..... Mobile ..... Email .....

Address .....

**FOURTH** person nominated for Membership .....

Telephone ..... Mobile ..... Email .....

Address .....

### Level THREE Membership

**FIFTH** person nominated for Membership .....

Telephone ..... Mobile ..... Email .....

Address .....

**SIXTH** person nominated for Membership .....

Telephone ..... Mobile ..... Email .....

Address .....

## ***Additional Contact***

### **Marketing Contact**

To ensure that event information is distributed to the correct person in your organisation

Name .....

Telephone..... Mobile..... Email.....

Address .....

### **Training / HR Contact**

To ensure that training information is distributed to the correct person in your organisation

Name .....

Telephone..... Mobile..... Email.....

Address .....

---

Our company can be described as:

- |  |  |                                   |
|--|--|-----------------------------------|
| <input type="checkbox"/> Consultant        | <input type="checkbox"/> Contractor        | <input type="checkbox"/> End User |
| <input type="checkbox"/> University / TAFE | <input type="checkbox"/> Vendor / Supplier |                                   |

Our company is primarily engaged in the following industry:

- |   |                                  |  |
|---|----------------------------------|--|
| <input type="checkbox"/> Automation         | <input type="checkbox"/> Control | <input type="checkbox"/> Instrumentation |
| <input type="checkbox"/> Mix of above areas |                                  |  |

Our company works mainly in / with the following industry sector(s):

- |   |                                     |                                       |
|---|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Aeronautical       | <input type="checkbox"/> Automotive | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Defence / Military | <input type="checkbox"/> Education  | <input type="checkbox"/> Energy       |
| <input type="checkbox"/> Manufacturing      | <input type="checkbox"/> Mining     | <input type="checkbox"/> Oil & Gas    |
| <input type="checkbox"/> Water              |                                     |                                       |

---

### **Payment Details**

Cheque for \$..... payable to IICA is enclosed

Charge my credit card with the amount of \$.....

- |                                     |                               |                               |
|-------------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> Mastercard | <input type="checkbox"/> Visa | <input type="checkbox"/> Amex |
|-------------------------------------|-------------------------------|-------------------------------|

Card Number..... / ..... / ..... Expiry Date..... / .....

Name on Card..... Signature.....