



75  
YEARS

*Corporate Industry Partners*

**CIP**

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

	<i>(GST Inclusive)</i>
<b><i>Level ONE - Small Companies &amp; Tertiary Education Institutions</i></b>	<b><i>\$450.00</i></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><i>Level TWO - Mid Sized Companies</i></b>	<b><i>\$850.00</i></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><i>Level THREE - Large Companies</i></b>	<b><i>\$1200.00</i></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.

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## **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 \_\_\_\_\_

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**Level TWO Membership**

**THIRD** person nominated for Membership \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

**FOURTH** person nominated for Membership \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

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**Level THREE Membership**

**FIFTH** person nominated for Membership \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

**SIXTH** person nominated for Membership \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

## ***Additional Contacts***

### **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 \_\_\_\_\_