




A registered, tax-exempt charity in Australia.
Registered for GST - Donations are tax deductible.
Incorporation Number: A0037035K

Beyond Disability Inc.

Connecting people living with disabilities to accessible technology

ABN: 82 846 344 613

 secretary@bdi.org.au

 PO Box 1335 Pearcedale VIC 3912

 www.bdi.org.au

APPLICATION FOR MEMBERSHIP FORM

Please note: BDI helps housebound physically and mobility disabled individuals, Veterans (widows or carers). In the event your application is refused, your initial payments will be refunded.

Need help to keep up with technology in this fast changing world of computers, tablets and phones? Our volunteers are here to help you with all forms of technology. We can assist school age children, adults, carers and veterans.

For a very minimal cost our volunteers will give you all the advice you need to meet your technical problems, whether you have your own laptop, tablet or desktop computer, or would like our equipment.

APPLICATION DETAILS

I desire to become a member of BDI and wish to apply to receive the ***Beyond Disability*** (BDI) service and provide the following in support of my application:

Full name of applicant: _____

Address: _____

Postcode: _____ Phone number: _____

Description of disability:

Date of birth: ____/____/____ Age: _____

Veterans-Service Number _____

Second contact name, address & phone no: (in case of emergency):

CONDITIONS OF APPLICATION

In making this application for membership I confirm that:

1. I am:
 - physically and/or mobility disabled and on a disability/carers pension.
 - or on a veteran pension
 - or on a like pension
 - a carer
 - other
2. I have read and understood the "BDI Services Terms and Conditions".
3. I have read and understood the "BDI Privacy Policy", available for download on the BDI website at www.bdi.org.au and hereby consent to BDI collecting my personal information for the purpose of processing my membership application and otherwise using it in accordance with the BDI Privacy Policy. I understand that I can seek access to the personal information that BDI holds about me and that if I do not provide all the information sought by BDI in this application form, BDI may not be able to process my application or provide me with all the services and support I am seeking.

PRIVACY DISCLOSURE AND PHOTOGRAPH CONSENT

4. I agree to BDI using my personal information (which may include my first name, age and disability) for the purpose of:
 - a. BDI contacting support groups on my behalf, to promote the BDI program(s) and/or obtain assistance or sponsorship support for me or for other BDI members, and in doing so may disclose personal information about me and my circumstances to these parties; and
 - b. BDI publishing photographs of me in its publications, on multimedia, via other internet websites in order to promote the BDI program(s).
 - c. I agree I understand that the full policy is available to me on the BDI website.
5. ☐ Please tick the box if you do not wish your personal details to be disclosed without prior written consent and describe any other conditions you would like us to adhere to relating to the disclosure of your personal information.

FORMATION OF AGREEMENT

6. You acknowledge and agree that once you have been notified that your membership application has been accepted and approved by BDI, this document and the "BDI Services Terms and Conditions" referred to in item 2 above, will form your Membership Agreement with BDI, and you will be bound by the terms and conditions contained within your Membership Agreement.

7. If the applicant is a child, this application must be signed by a parent or nominated carer of the child.

SIGNATURE

Signature of applicant/parent/carers: _____ Date: ____/____/____

I, a member of BDI, nominate the applicant(s), for membership of BDI.

Signature of member: _____ Date: ____/____/____

PAYMENT OPTION

All applications for membership will need to include an initial payment which is:

8. The first **Quarter's** programme fee of \$33 (inc GST) if you have your own broadband connection. Thereafter we prefer \$11 monthly payment or \$33 quarterly payment by bank debit as below

9. **OR** the **first Month's** payment of \$23 (inc GST) if you require **BDI Wireless Broadband** Thereafter we prefer \$23 monthly payment or \$69 quarterly payment by bank debit as below

Note: if the application is unsuccessful the initial payment will be refunded.

Payment Options:

Direct credit to our bank account:

Account name: Beyond Disability Inc.

BSB: 633 – 000

Account number: 131827487

Bank: Bendigo Bank, Pearcedale

Reference: (put your surname and initials here)

Ask your bank if they can set up telephone banking to help you to pay your program fees on a timely basis.

If you need to discuss financial distress then please get in touch with us, and if you qualify we will send sponsorship paperwork to you.

SEND APPLICATION TO:

Email: secretary@bdi.org.au

Mailing Address: PO Box 1335 Pearcedale VIC 3912