YOUR VAHPA MEMBERSHIP INCLUDES:

Collective Bargaining

Together we are able to negotiate fair and reasonable wages and conditions. We are committed to ensuring that Allied Health Professional jobs are good jobs. Your work must deliver good healthcare outcomes while being gratifying and fulfilling.

Employees in the healthcare and social assistance industries who are union members earn on average $182 a week more than non-members.That's a whopping UNION PAY ADVANTAGE of more than $9,000 a year.

Advice & Representation

We provide professional assistance on underpayment, redundancy, leave entitlements, bullying and other workplace issues.

An Industry Voice

VAHPA is a democratic organisation representing the professional interests of members through policy and advocacy in the broader community.

Indemnity Insurance

Members receive $10 million insurance at no extra cost to protect you against legal liabilities from your work. Meets professional registration requirements. Includes run-off cover. No excess.

Free Legal Advice

Members are eligible, upon VAHPA referral, to receive free legal advice on industrial matters and additional services from leading industrial and personal injury law firm Maurice Blackburn.

Continuing Professional Development

VAHPA provides a comprehensive and high-quality online CPD program. Members receive free access to the program, are entitled to big discounts on courses, can access the online resource library and our ePortfolio—where you can easily track and record your CPD activities.

VAHPA

MEMBER ASSIST HELPLINE

The dedicated *VAHPA Member Assist Team* is here to provide you with the information, support and representation you need in the workplace.

CONTACT THE MEMBER ASSIST HELPLINE

8am - 6pm Monday to Friday

1300 322 917

or email info@vahpa.asn.au.

CONTACT VAHPA

Post PO Box 13286, Law Courts, VIC 8010
Street 351 William St, West Melbourne, VIC 3003
Fax 03 9329 6468 | **Phone** 1300 322 917
Email info@vahpa.asn.au
ABN 38 106 461 384

facebook.com/vic.hpa twitter.com/vahpa1

vahpa.asn.au

VAHPA
YOUR UNION

Join today.

www.vahpa.asn.au or call **1300 322 917**

Authorised by Craig McGregor VAHPA Secretary

"VAHPA is a democratic community of Allied Health Professionals. Communities thrive where members are committed and active."

Craig McGregor,
VAHPA Secretary

MEMBERSHIP CONTRIBUTIONS

Membership Contributions schedule as at 01 January 2017

Fortnightly	Monthly	Quarterly	Annual
Full-time (over 24 hours per week)			
$26.52	$57.46	$172.38	$689.52
9-24 hours per week			
$19.98	$43.29	$129.87	$519.48
<9 hours per week			
$13.26	$28.73	$86.19	$344.76
Early Career (first 2 years inc. intern year)			
-	$9.72	$29.16	$116.64
Parental Leave			
-	$9.72	$29.16	$116.64
Student*			
*Student membership does not include access to all membership benefits			$0.00

Low income earners may be eligible to receive a 15% discount.

N.B. Dues generally increase in accordance with public sector rates of pay.

APPLICATION TO JOIN VAHPA

Please fill in the form below and return to the VAHPA office. Or join online at **vahpa.asn.au** or by calling **1300 322 917**.

MY DETAILS

First Name:	Family Name:	Date of Birth:
Profession:	Gender:	
Home Address:		
City:		Postcode:
Mobile:	Alternative contact number:	
Primary email (not your work email address):		

MY WORK [2]

☐ Self employed

Primary Employer:	
Primary Worksite Address:	
City:	Postcode:
Secondary email:	
Other Employer/s:	
Total hours per week employed as a Health Professional [2]:	
Grade and Year:	
If Early Career – Graduation Date:	

DIRECT DEBIT Please select one method below:

Membership Category:

☐ Fortnightly ☐ Monthly ☐ Quarterly ☐ Annually

☐ **Bank/Savings Account** [3]

Account Name:

BSB : Account Number:

☐ **Credit Card Payment** [4]

☐ Mastercard ☐ Visa

Cardholder Name:

Card Number:

Expiry: CVV:

☐ I certify the above information is correct. I accept the Direct Debit Service Agreement Terms and Conditions (adjacent). I agree to become a VAHPA member and to abide by the Union's rules and policies. I understand that my membership remains in force until such time that I resign in writing.

My Signature:	Date:

FINE PRINT

1 Terms and conditions apply, see vahpa.asn.au for further details.

2 You must provide accurate information about your hours of work and disclose any relevant pre-existing workplace issue(s). Failure to do so may invalidate your VAHPA indemnity insurance.

3 I/we authorise Ezidebit Pty Ltd ACN 096 902 813 (User ID No. 165969, 303909, 301203, 234040, 234072, 428198) to debit my/our account at the Financial Institution identified above through the Bulk Electronic Clearing System (BECS) in accordance with the Debit Arrangement stated above and this Direct Debit Request and as the Ezidebit DDR Service Agreement (Ver 1.5) provided.

4 I hereby request and authorise VAHPA (ABN 38 106 461 384) to arrange, through the Bulk Electronic Clearing System (BECS), payments from my nominated account above in accordance with published membership rate schedules and/or other amounts agreed above. By signing herein I indicate I have understood and agreed to the debit arrangements between VAHPA and myself as set out in this Request and in the Direct Debit Service Agreement terms and conditions available at www.vahpa.asn.au.