



# membership application

## CONTACT DETAILS:

Organisation Name: \_\_\_\_\_

Contact Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Postal Address: Street: \_\_\_\_\_ Suburb \_\_\_\_\_ State \_\_\_\_ Postcode: \_\_\_\_\_

*SARTA Friday Bulletin, a weekly publication sent out to all members, provides industry information on current events that affect the Trucking Industry. This will be emailed to you at the email address listed above. Bulletins are also available on the SARTA Website, under the Member Resources tab.*

## FLEET & OPERATIONAL DETAILS:

Type of Operation (Please tick the most appropriate description of your operation)

<input type="checkbox"/> Armoured	<input type="checkbox"/> Bulk	<input type="checkbox"/> Car Carrier	<input type="checkbox"/> Container	<input type="checkbox"/> Courier Taxi Truck
<input type="checkbox"/> Fuel	<input type="checkbox"/> Furniture	<input type="checkbox"/> General Freight	<input type="checkbox"/> Grain	<input type="checkbox"/> Livestock
<input type="checkbox"/> Refrigerated	<input type="checkbox"/> Supplier	<input type="checkbox"/> Tip Truck	<input type="checkbox"/> Waste	<input type="checkbox"/> Overdimensional Loads
<input type="checkbox"/> Other	<input type="checkbox"/> Interstate ____ % per week		<input type="checkbox"/> Intrastate ____ % per week	

Types of Vehicles Used (Please tick)

<input type="checkbox"/> Armoured	<input type="checkbox"/> B-Double	<input type="checkbox"/> Containers	<input type="checkbox"/> Livestock	<input type="checkbox"/> Rigid
<input type="checkbox"/> Road Train	<input type="checkbox"/> Semiarticulated	<input type="checkbox"/> Superdogs	<input type="checkbox"/> Tankers	<input type="checkbox"/> Tippers
<input type="checkbox"/> Vans	<input type="checkbox"/> Waste			

**Number of Vehicles Owned:** \_\_\_\_\_ **& Subcontracted:** \_\_\_\_\_

\_\_\_\_\_ **Total**

How many Staff do you have?

\_\_\_\_\_ Drivers    \_\_\_\_\_ Office Staff    \_\_\_\_\_ Yard Staff    \_\_\_\_\_ Workshop

\_\_\_\_\_ **Total**

**SARTA FEE STRUCTURE:**

Membership Fees are based upon fleet size including any prime movers owned and sub-contractor prime movers forming a regular part of that fleet. (*Please tick appropriate level of vehicles*)

<input type="checkbox"/>	0	Vehicles: Associate Member	\$1,265.00 p.a.
<input type="checkbox"/>	1-2	Vehicle Owner/Driver	\$192.50 p.a.
<input type="checkbox"/>	3-14	Vehicles	\$104.50/vehicle p.a.
<input type="checkbox"/>	15-40	Vehicles	\$1,925.00 p.a.
<input type="checkbox"/>	41	Vehicles or more	\$2,530.00 p.a.
<input type="checkbox"/>	Industry Associations		Fee subject to negotiation

*NB: All fees include GST and is payable upon application*

SARTA Members receive the SARTA Friday Bulletin and any information regarding industry developments that are relevant. SARTA also provides a range of support and advice on Industrial Relations, Legislative Requirements and assistance in dealing with Government agencies. Members also have access to the Members Only Area on the SARTA Website for information on wage rates, past SARTA Bulletins, IR and Employee Management information.

**DECLARATION:**

Please complete the following details to enable SARTA to provide your organisation with relevant information on industry and industrial relations developments and issues.

I/We hereby apply for membership of the South Australia Road Transport Association Incorporated.

Company Name: \_\_\_\_\_

Trading Names \_\_\_\_\_

\_\_\_\_\_

Name of Managing Director or Owner: \_\_\_\_\_

I/We hereby agree, upon acceptance into Membership of SARTA, to be bound and to abide by the Constitution, Rules and By-Laws of the Association. I/We also acknowledge that a GST is applicable and payable upon membership application.

Signed \_\_\_\_\_ Date: \_\_\_\_\_ Name: \_\_\_\_\_

Signed \_\_\_\_\_ Date: \_\_\_\_\_ Name: \_\_\_\_\_

*Note: This application shall, in the case of a partnership or firm be signed by all the partners. In the case of a corporation. be under the seal of such corporation and in all other such cases be signed by the prospective member.*

Please return this completed form to SARTA with payment to:

Postal Address: PO Box 2420, Regency Park SA 5942 or

Hand delivered: Unit 1 Office B, 40 Birrallee Road, Regency Park SA 5010

Contact Telephone: 08 8445 8177 Fax: 08 8445 8199 Email: [sarta@sarta.org.au](mailto:sarta@sarta.org.au) Website [www.sarta.org.au](http://www.sarta.org.au)

**PAYMENT DETAILS:**

Membership Fee \$ \_\_\_\_\_

Method of Payment:  Cheque or  Credit Card

Credit Card Details:

Mastercard  Visa  CVV Number: \_\_\_\_\_

Expiry Date \_\_\_\_/\_\_\_\_

Cardholder \_\_\_\_\_ Signature \_\_\_\_\_