

**Student membership >**

a student enrolled in an approved real estate course of study with The Real Estate Institute of Queensland [REIQ].

**APPLICANT**

Title	<input type="text"/>	REIQ ID	<input type="text"/>
First name	<input type="text"/>	Surname	<input type="text"/>
Private address	<input type="text"/>		
Postal address	<input type="text"/>		
Email	<input type="text"/>	Mobile	<input type="text"/>
DOB	<input type="text"/> <small>(ddmm)</small>	<input type="text"/> <small>(yyyy)</small> <small>optional</small>	Preferred mailing address <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/>
Course(s) undertaken	<input type="text"/>		
	Expected date of completion <input type="text"/>		

**EMPLOYER** [if applicable]

Accredited agency / membership number

Business entity	<input type="text"/>		
Trading as	<input type="text"/>		
ABN	<input type="text"/>	ACN	<input type="text"/>
Street address	<input type="text"/>		
Postal address	<input type="text"/>		
Telephone	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>	Website	<input type="text"/>
Position	<input type="text"/>		

**AREAS OF INTEREST**

<input type="checkbox"/> Auctioneering	<input type="checkbox"/> Business broking	<input type="checkbox"/> Buyers' agent	<input type="checkbox"/> Holiday letting
<input type="checkbox"/> Management rights sales	<input type="checkbox"/> Property management	<input type="checkbox"/> Residential sales	<input type="checkbox"/> Commercial
<input type="checkbox"/> Women in real estate	<input type="checkbox"/> Residential letting agent	<input type="checkbox"/> Administration/corporate support	
<input type="checkbox"/> Rural sales	<input type="checkbox"/> Young agents group		

### MEMBERSHIP FEES

12 months membership is \$100 (incl. GST). Student membership is only valid for 12 months from date of processing membership application.

**Payment is required in advance and a tax receipt will be issued with your confirmation letter.**

Cheque [please make cheques payable to the REIQ]  
 Visa  MasterCard

Expiry     Amount

Credit card number

Cardholder's name  Cardholder's signature

### DECLARATION

I declare that the statements set out above are true. I undertake to be bound by the Constitution, the Standards of Business Practice and any rules, regulations or By-laws now existing, or at any time existing (copies of the By-laws and Constitution can be found at reiq.com). I hereby certify that I have the authority to sign this form. I agree that in the event of any dispute with any other member of the Institute or with any person concerning any matter which is provided for in the said Constitution, the Standards of Business Practice and any rules, regulations or By-laws of the Institute, I will use my best endeavours to resolve the dispute in accordance with the Standards of Business Practice.

Name  Signature   
Date

### PRIVACY POLICY

The personal information you have provided on this form may be used to contact you with information on new products, services and industry events, or simply to participate in member surveys. The vast majority of our members and non-member clients welcome this communication.

However, in full recognition and respect of your privacy rights, you can manage your communication options at reiq.com. To view our full Privacy Policy, please go to reiq.com or contact the REIQ on 07 3249 7347.

PLEASE SEND COMPLETED FORM TO >

E members@reiq.com.au F 07 3249 6214 M PO Box 1555 Coorparoo DC QLD 4151