



NTPA MEMBERSHIP FORM

MEMBER DETAILS

Family name _____ Given Name _____

☐ Principal ☐ Assistant Principal ☐ Other _____

School / Workplace _____

Postal Address _____

Mobile No: _____ Work No: _____

Email: _____

AFFILIATION (Please tick one) A portion of your fees will go towards affiliation fee to the association chosen .

☐ ASPA ☐ APPA ☐ ASEPA ☐ NONE

CHAPTER (Please tick one)

☐ Arnhem ☐ Barkly ☐ Central ☐ Big Rivers ☐ Palmerston & Rural ☐ Darwin & Nth Suburbs

MEMBERSHIP STATUS (Please circle one) **NON REFUNDABLE**

☐ Government P1 (\$286) P2 (\$295) ST3/PL3(\$310) ST4 (\$318)

P4 (\$333) P5 (\$352) P6 (\$370) P7 (388)

☐ Catholic & Independent School Sector (\$186.00) ☐ Associate Member (\$60.00)

PAYMENT DETAILS (Please tick one)

☐ Direct Deposit - NTPA BSB: 065 903 A/C NO: 0090 1400 (Include name as REF in bank)

☐ Payroll Deduction (NTG Employees only - NTPA Admin will email a form to complete if ticked)



Advocacy



Leadership



Leader Wellbeing

Please email completed form to
ntpa.admin@education.nt.gov.au