

**Become a member of HTAWA, the association that provides support to history teachers by history teachers!**

**The HTAWA exists to help teachers of History by providing these membership benefits of:**

- Promotion of the interests of Western Australian history teachers at a State and Federal level;
- Professional development workshops related to WA Curriculum: History (P – 10), WACE Modern History and WACE Ancient History;
- Regular HTAWA Bulletins that provide information on upcoming events and issues related to history and the teaching of history;
- Support for teachers of History from experienced History and Society and Environment teachers;
- Access to teaching resources for Australian Curriculum: History, WACE Modern History and WACE Ancient History;
- Support and promotion of the National History Challenge and Simpson Prize;
- An annual Hindsight journal;
- Access to resources promoting the status of History in schools;
- Free entry to HTAWA Student Revision Seminars;
- Access to a catalogue of HTAWA teaching resources at 10% discount on all of HTAWA produced resources;
- A discount of 5% off your entire shopping cart when shopping at [www.booktopia.com.au](http://www.booktopia.com.au);
- Voting rights at the Annual General Meeting.
- A membership lasts for 12 months.

**To become a member simply fill in the subscription form and return it to us with your payment.**



ABN 59 304 823 680

# SUBSCRIPTION FORM / TAX INVOICE

(All prices include GST. A membership lasts for 12 months.)

## MEMBERSHIP TYPE: (please tick)

**INDIVIDUAL (\$80)** - incl. FREE online Hindsight

**PRIMARY**

**SECONDARY**

**SCHOOL (\$160)** - incl. FREE online Hindsight

for two nominated teachers (\$160); additional teachers can be added to school membership at the rate of \$80 per teacher.

**INSTITUTIONAL/CORPORATE (\$170)**

Includes one annual 1/2 page advertisement supplied as a pdf in the Bulletin, and discount on displays at HTAWA events.

**Printed Hindsight (\$10)**

NAME: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

INSTITUTIONS: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

NAME 1: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

NAME 2: \_\_\_\_\_

AREA(S) OF INTEREST: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

AREA(S) OF INTEREST: \_\_\_\_\_

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Please return this form together with payment to:

**HTAWA (Inc.)**  
**PO Box 1145, Scarborough, WA 6922**  
**FAX: 08 9204 5112**

**Or join online at [www.htawa.org.au](http://www.htawa.org.au)**

## PAYMENT OPTIONS: (please tick)

Cheque (payable to HTAWA Inc.)

Credit Card \$ \_\_\_\_\_

Credit Card Authority: Mastercard/Visa

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Email address for receipt: \_\_\_\_\_