

MEMBERSHIP APPLICATION – AFICA

COMPANY NAME:.....ABN:.....

TRADING NAME:.....

BUSINESS ADDRESS:.....

TELEPHONE:.....FACSIMILE.....MOBILE:.....

E:MAIL:..... WEBSITE.....

I/We the undersigned having read the Association's Mission Statement, Purposes, Model Rules, and agreed Code of Ethics hereby endorse those documents and confirm that they are consistent with the applicant's own objectives, and code of ethics, confirm that I/We desire to become a Member of AFICA, the Aluminium Foil Insulation Council of Australia (Inc).

In the event of admission as Member, the applicant agrees to be bound by the Rules of AFICA for all of the time being in force and abide by the Association's Code of Ethics and to uphold the spirit of the Association's Mission Statement.

The applicant nominates the individuals described below as its representative and alternative representative.

Representative: Alternative:

Member & Fees (Annual) - tick category applied for:

Manufacturer Membership Distributor Membership (\$350) *\$200 Inaugural first year
Associate Membership (\$50) Overseas Membership (\$50)

Manufacturer Membership - Annual Fee Schedule

\$00 - \$1M	\$500.00	<input type="checkbox"/>
\$1M - \$5M	\$1000.00	<input type="checkbox"/>
\$5M - +	\$2000.00	<input type="checkbox"/>

Fees are based on the turn-over of the member company. Please indicate the turn-over bracket that applies to your company.

Voting Rights Entitlement – for Standards, Codes & Regulations

*Restricted to Manufacturer Members & authorised Associate Members

Once membership is accepted, make payment: ANZ (Cheltenham VIC) 013483 - 314935394

Banking confirmation sent to: info@afica.org.au

Signature on behalf of applicant: Name:

Position held: Date: