



Please print this form and fax to (02) 9299-1433

APPLICATION FOR ORDINARY OR ASSOCIATE MEMBERSHIP

Please tick the appropriate box:

- Ordinary Membership** - \$220.00 incl. GST per calendar year
- Associate Membership** - \$110.00 incl. GST per calendar year

Dear Sir/Madam

Application for membership of the Financiers' Association of Australia Limited is hereby made and if accepted, I agree to adhere to the following:

- Abide by the Memorandum and Articles of the Association of the Financiers Association of Australia
- Comply strictly with the Credit Act; Consumer Credit Code; Trade Practices Act; Privacy Act and any other relevant legislation
- Observe and practice the Association's Code of Ethics

It is agreed that if any complaint is made against any member and is investigated and substantiated, by the Board of Management of the Association, such Board has the right to make a decision and this Board decision could result in cancellation of membership with the Association.

Enclosed herewith, please find payment in the amount of \$_____ for Ordinary Membership / Associate Membership to 31 December 200_

Full Name, Address & Contact Details

.....
.....

ABN

Business Address

.....
.....

Directors or Partners: Names & Contact Numbers

1.
2.
3.

The Association may obtain References from:

- (1)
- (2)

Signature

Date.....