

Australian Construction Modellers Association Ltd

COMPANY MEMBERSHIP APPLICATION

COMPANY INFORMATION		
Business Name:		
Street Address:		
City:	State:	Post Code:
Postal Address:		
Ph:	Fax:	
Web Site:		
Years trading:	Number of Employees:	
CAD Software in use:		
Number of Licenses for each software:		
COMPANY REPRESENTATIVE INFORMATION		
Surname Name:	Given Name:	
Position within the business:		
Ph:	Mob:	
Email:		

- I apply for membership as a ☐ Sole Trader
☐ Company 'A' – Up to 5 staff
☐ Company 'B' – from 6 to 15 staff
☐ Company 'C' – 16 or more staff
☐ Associate – Representing a company

I _____ as a representative of the applicant listed above, I hereby declare that this company meets all the criteria stated in the "Membership Criteria" of the ACMA Ltd

I hereby also agree to abide by the ACMA Code of Ethics and submit to an annual review of my membership by the ACMA Board if deemed necessary.

Please attach all supporting documentation to this application.

Signature of applicant: _____ Date: _____

Email to: info@austcma.org.au

Fax: 07 3257 3910

Postal Address: 20/76 Doggett Street Newstead. Brisbane QLD. 4006