



Australian Surety Association

ABN 49 086 597 177

Member of the



Member Application

Member's Company Name:

Member Company's ABN

Address

.....Suburb:Post Code:

Contact Details:

Name of Contact Person / Representative:

Telephone Number: Fax

Email Address:

Application

.....Limited hereby applies to become
(name of company)

- a Voting or
- an Associate

Member of the Australian Surety Association Limited and agrees to comply with and conform to the Constitution of the company as set out for the time being and from time to time.

Signed on behalf of the Applicant by

Name Authorised Person:

Position Held

Signature of Witness.....

Name of Witness:

Fees:

Joining Fee:		\$ 500.00
Current Fee	Voting Member	\$3,500.00
	Associate Member	\$1,100.00

Please make cheques payable to Australian Surety Association Limited

Australian Surety Association Limited ABN 49 086 597 177

All correspondence to:

Registered Office, c/- Walker Laanemaa, Level 11, 84 Pitt Street, Sydney NSW 2000