

APPLICATION FOR MEMBERSHIP

Australian Organisation for Quality Ltd
ABN: 12 611 318 980

Ph: 1800 725 850 E: admin@aoq.net.au www.aoq.net.au



1. PERSONAL DETAILS

Mr Mrs Ms Miss Dr Other Position/Appointment

Surname Business Name

First Name/s ABN

2. BUSINESS DETAILS

3. CONTACT DETAILS

Address

State Postcode

Phone 1) 2) Email

3. MEMBERSHIP TYPE - fees are inclusive of GST

Personal

- Personal Member \$185.00
 Concession* \$74.00

Corporate

- C1 1 to 10 employees \$370.00
C2 11 to 100 employees \$555.00
C3 101 to 250 employees \$740.00
C4 251 + employees \$925.00

Pro rata Fees available on a quarterly basis.

** Concessional rate covers students, not currently in employment, retired and underemployed (refer to the AOQ Membership Grades Policy)*

4. INDUSTRY SECTOR - please select one of the following

- A Agriculture, Forestry, Fishing
B Mining
C Manufacturing
D Electricity, Gas, Water, Waste Services
E Construction
F Wholesale Trade
G Retail Trade
H Accommodation and Food Services
I Transport, Postal, Warehousing
J Information Media and Technology
K Financial and Insurance Services
L Rental, Hiring and Real Estate Services
M Professional, Scientific and Technical Services
N Administration and Support Services
O Public Administration and Safety
P Education and Training
Q Health Care and Social Assistance
R Arts and Recreation Services
S Other
- What does your firm do?

5. REFERRAL INFORMATION

Who referred you to AOQ?

How were you referred to AOQ?

6. PAYMENT OPTIONS

Credit Card - if paying by credit card, please complete the following details:

Mastercard Visa

Credit Card No --- Expiry Date / CVV

Direct Debit - on receipt of this application, a tax invoice will be sent to you via email for your immediate attention

Cheque - please make your cheque payable to Australian Organisation for Quality Ltd and attach to this application

7. DECLARATION BY APPLICANT

• I agree that and confirm by signing below, on the acceptance of my application for membership by the Australian Organisation for Quality Ltd, I shall be governed by the Constitution and that I shall advance the aims of the Organisation as far as practical in my power and for such time as I remain a member.

Visit: <http://aoq.net.au/wp-content/uploads/2012/11/AOQ-Ltd-Constitution-v1.0.pdf>

• I confirm by signing below that I have read the Fit and Proper Person Policy and comply.

Visit <http://aoq.net.au/wp-content/uploads/2012/11/AOQ-Fit-and-Proper-Person-Policy.pdf>

• I certify by signing below that all statements contained in this form are, to the best of my knowledge, true and correct.

Signature of Applicant..... Date

Your application will be assessed on receipt of this completed application and you will be notified of the result in due course.

All applications will be treated in strict confidence.

Office Use Only

Member No. _____
Inv No _____
Inv. Date / /
Invoiced / /
Telephoned / /
Payment / /
Letter / /
BPIR / /
Certificate / /