

APPLICATION FOR MEMBERSHIP OF ASSOCIATION

(Incorporated under the Associations Incorporation Act. 1984)

APPENDIX 1 (Rule 3 (1))

I,(Full name of applicant)
Of(Address),
..... (Occupation), apply as member of the above mentioned
Incorporate Association would like to apply as a (level of membership
being applied for). In the event of my admission as member, I agree to the following :

- be bound by the rules of the Association for the time being in force.
- acknowledge that I have read the Code of Ethics and agree to abide by the code of ethics whilst a member
- agree to maintain requirements such as Level 2 First Aid and Professional Indemnity & Public Liability Insurance.

Signature of applicant: Date:

I,....., a member of the Association, (Full name) nominate the applicant, who is personally known to me, for membership of the Association.

Signature of proposer Date:

Applicant Contact Details

Mailing Address:

Suburb: State: Postcode:

Studio Name (if applicable):

Studio Address:

Suburb: State: Postcode:

Region:(for use putting on members directory)

Freelance: Yes/No

Phone (w): () Fax: ()

Mobile: Phone (h): ()

Email:

Expertise:

Australian Pilates Method Association

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