**AfPA Membership Application**

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| **Company/Applicant Name** | | | | |
| Company/Applicant Name: | | ABN: | | |
| Trading Name: | | | | |
| Street Address: | | | | |
| Suburb: | | | State: | Postcode: |
| Website: | | | | |
| **Company/Individual Contact for the Association** | | | | |
| First Name: | | Last Name: | | |
| Email: | | | | |
| Job Title: | | Phone: | | |
| Suburb: | | | | |
| Phone: | | | | |
| **Company Information** | | | | |
| What State/s do you operate in? |  | | | |
| Where do you operate primarily? |  | | | |
| Membership Category you are applying for: |  | | | |
| Annual Tonnage (Producer Member applicants only): |  | | | |
| How long has the company been in business? |  | | | |
| How many staff does the Applicant Company employ? |  | | | |
| What are your reasons/ motivations in joining AfPA? (Tick the options that apply or provide your own answer in Other)  Networking  Training  Technical Documentation and Talks / Webinars  Representation / Influence  Other (Please type reason) ………… | | | | |
| What areas of activity are undertaken by Company (e.g. Spray Sealing, Staffing, Traffic Management, Pavement Design, Consulting, Equipment Supply)? | | | | |
| Tell us about some of the projects you have been a part of? (50 words or less) | | | | |
| Who have you worked with in the Industry? (Name some of your customers/partners/supporters) | | | | |