



## The Australian Shop & Office Fitting Industry Association Limited

A.C.N 131 969 912

### APPLICATION FOR MEMBERSHIP

*A Member shall be any individual, partnership, trust, or corporation engaged in the design, supply, manufacture, installation, alteration and/or repair of shop fronts, showcases, and/or interior fittings and fixtures in and/or on buildings or any other association, subcontractor, building owner and operator which is closely allied to or associated with the industry.*

#### 1. APPLICANTS DETAILS

Applicants Name

(Company, individual or partnership name)

Trading As

Contact Name

Position in Company

Address

Suburb

State

Post Code

Phone Number

Fax Number

Mobile No

Email Address

Website

Names of partners, shareholders or others holding a financial interest in the business:

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## 2. BUSINESS INFORMATION

(shopfitting components)

- Shopfitter     Office Fitter     Cabinet Maker/Joiner     Manufacturer     Supplier
- Service Provider     Subcontractor     Other Please Specify

Period in Industry                  years                  Average number of employees at year ended 30 June

Industry Licence number                  State                  Company ABN

\* Descriptions of Business Categories:

*(please review the description of business categories before completing the business information above).*

- SHOP & OFFICE FITTERS**    executes planning, design of shop layout & physically installs equipment & components for the inside of shop or office premises.
- CABINET MAKER/JOINER**    manufactures joinery for sale to other shop & office fitters (does not work onsite).
- MANUFACTURER**    manufactures in large quantities & sells to the market place (*a shopfitter who manufactures components for their own fitouts ONLY is not considered a manufacturer*)
- SUPPLIER**    markets, distributes & on sells products to the market place.
- SERVICE PROVIDER**    provides a service/commodity which complements the shop & officer fitters' role in completion of premises.
- SUBCONTRACTOR**    contracts to the Head Contractor to supply or fix any materials or goods or execute work forming part of the main project.

## 3. MEMBERSHIP CLASSIFICATION

Please select which classification/s of membership is / are required by your business.

- Standard Membership                   Additional State Membership                  Number of States
- Standard Membership with affiliated MBA Membership for industrial relations support \*     Additional State Membership with affiliated MBA Membership for industrial relations support \*
- National Membership \*\*                   Educational Membership \*\*\*

\* Only provided in NSW & QLD

\*\* Includes membership to all 5 divisional states (QLD, NSW, VIC, SA, WA) with either a company contact per state or one national contact

\*\*\* For TAFE's & RTO's

Review separate Membership & Classification Fees schedule for fee pricing

#### 4. ADDITIONAL STATE MEMBERSHIP

*Additional State Members are recognised as Members with full Membership entitlement and voting rights at a State level. An Additional State membership is generally undertaken when an organisation has an additional branch in another state, where a nominated company representative may participate in divisional functions.*

State

Contact Name

Position in Company

Address

Suburb

State

Post Code

Phone Number

Fax Number

Mobile No

Email Address

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State

Contact Name

Position in Company

Address

Suburb

State

Post Code

Phone Number

Fax Number

Mobile No

Email Address

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State

Contact Name

Position in Company

Address

Suburb

State

Post Code

Phone Number

Fax Number

Mobile No

Email Address

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State

Contact Name

Position in Company

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Suburb

State

Post Code

Phone Number

Fax Number

Mobile No

Email Address

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## 5. PRIVACY and CONSENT TO RELEASE DETAILS

I, \_\_\_\_\_ of \_\_\_\_\_ located at \_\_\_\_\_

hereby consent to our Company details (*including that of any additional state membership we hold of ASOFIA*), together with a contact name(s) and email address (es) for the Company to be included in:

**[Tick the boxes to which you consent]**

- ASOFIA General Member Information & Events Update<sup>1</sup>

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- ASOFIA Online Membership Directory

- ASOFIA Printed Membership Directory<sup>2</sup>

- ASOFIA Marketing & Promotional<sup>3</sup>

The above Company may wish to nominate an additional email address for the information below the line :

Nominated email address .....

- I have read ASOFIA's privacy policy (attached) and consent to information provided by the Company (including personal information) being handled as set out in the policy".

Signed for and on behalf of the Company ..... Date:.....

**Please sign and return by 30 of the month via fax, post or email.**

Failure to submit this consent form will result in member details being eliminated from the Association's printed Membership Directory and the Website Membership Directory.

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<sup>1</sup> ASOFIA communicates with its membership in many ways including via email and through its Divisional structure. These emails contain content including but not limited to important industry news, legislative changes both State and Federal, work referrals, newsletters & networking events including meetings, social & sporting events and conferences. Occasionally the Association publishes event details including photographs on the Association's website, and in its newsletters, brochures or industry magazines & publications.

<sup>2</sup> The ASOFIA Printed Membership Directory is distributed to third parties at the discretion of ASOFIA including current members of ASOFIA, attendees & participants at trade shows, recipients of the Interior Fitout Magazine and other interested parties.

<sup>3</sup> Lists are sent to ASOFIA Divisions, current ASOFIA members, suppliers, promoters, sponsors, advertisers, and third parties seeking to establish a working relationship with ASOFIA members. Details may be used for distribution, advertising, marketing & publicity purposes.

## 6. PREVIOUS MEMBERSHIP

Has the applicant or any person holding an interest in the business ever held membership with ASOFIA.  Yes  No

If so, when \_\_\_\_\_ provide details

## 7. DECLARATION

By the signature below, the Applicant:

1. Agrees to abide by the Rules, Divisional By-Laws & Code of Ethics (as amended from time to time) of the Company.
2. Accepts that the application will not be considered if any individual, partner, shareholder, director or other person holding a financial interest in a new or existing entity applying for Membership has been involved in any organisation which has become insolvent, has had a receiver, receiver and manager, administrator or liquidator appointed, or wound up (except for the purposes of reconstruction or amalgamation) anytime during the two years immediately prior to the date of application.
3. Declares that no application of the applicant has been submitted and refused by any other Trade or Industrial Association.
4. Understands that this application is subject to the approval of the relevant State Division and/or the Company's Board of Directors whose decision shall be final.
5. Accepts that, in accordance with the Rules of the Company, all membership matters including applications, changes of detail and resignations must be submitted in writing.
6. Grants permission for details of the applicant to be included in Company publications, website and other marketing activities provided for as part of the Association's membership benefits, and confirm that this authority is given in satisfaction of the requirements of the Privacy Act 1988 (Commonwealth) and/or any similar Act.

In making this application, I hereby authorise the Australian Shop & Office Fitting Industry Association Limited to make full enquiry of the details provided within.

Name

Position in Company

I certify that by ticking this box and placing an electronic signature below I agree to the above declaration.

Signature

Date

**ALL MEMBERSHIP APPLICATIONS MUST BE ACCOMPANIED BY PAYMENT OF APPLICATION FEE**

07/16

### Payment Types

Cheque made payable to ASOFIA and send with application form

or

Direct deposit:

BSB: 012 881

Account #: 482588387

Reference: Your Company name Application fee

### Forward Application via mail to:

ASOFIA National Office

P O Box 6347

KINCUMBER NSW 2251

Submit by Email

**Please indicate where you heard about the Australian Shop & Office Fitting Industry Association Limited**

Learnt about ASOFIA

Other please specify

**Any queries please contact National Office on**

Ph: 02 - 4369 0055

Email: [national\\_office@asofia.com.au](mailto:national_office@asofia.com.au)