

WFAANZ MEMBERSHIP APPLICATION FORM

I wish to apply for WFAANZ membership as a:

☐

Distributor
member

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Associate
member

Company name: _____ ABN: _____

Trading/Business
name: _____

Address: _____

Postcode: _____

Phone: _____ No. of years
trading: _____

Email: _____

Website: _____

I hereby apply for membership of the Window Film Association of Australia & New Zealand. I and my employees agree to abide by the WFAANZ Constitution and Code of Ethics*.

Name: _____ Position: _____

Signature: _____ Date: _____

MEMBERSHIP QUALIFICATIONS

The Membership of the Association shall consist of “**Distributor Members**” and “**Associate Members**”.

A person, firm or company is qualified to be a **Distributor Member** whose part or sole business is as a Wholesale Distributor of Window Film and has paid his/her/its subscription for the current year. This includes the importation of window film for the purpose of wholesaling. A person, firm or company whose part of sole business is the wholesaling of window film without importation shall be classified as a Distributor Member unless the majority of the products they are wholesaling are being imported by a current Distributor Member, in which case they shall be classified as an Associate Member. A Distributor Member shall be entitled to a minimum of one (1) and a maximum of two (2) representatives on the Executive Committee. Distributor membership fee: AU\$5,500 (GST inc.)

A person, firm or company is qualified to be an **Associate Member** of the Association if he/she/it is an owner or operator of a window film business, meets the provision within clause 5.2 and has paid his/her/its subscription for the current year. An Associate Member shall be entitled to speak and be heard at all General Meetings of the Association but shall only be entitled to hold an office in the Association or in any Committee or Sub-Committee thereof if invited to do so by the Executive Committee. Associate membership fee: AU\$385 (GST inc.)

WFAANZ membership is financial year July to June.

*Download the WFAANZ Constitution and Code of Ethics here: www.wfaanz.org.au/order-forms

To apply for membership, please submit this completed form to info@wfaanz.org.au.

Your application will be sent to the WFAANZ Executive Committee for approval.

Upon approval, you will be issued an invoice from WFAANZ.

Office use only	Date received: _____	Membership no.: _____
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