

APPLICATION



Application for Associate Membership of the Association

TAFE DIRECTORS AUSTRALIA INCORPORATED
(Incorporated under the Associations Incorporation Act 1991)

Associate Member (Organisation)

Associate Member (Individual)

(full name of applicant)

(address)

hereby apply to become a member of the above named incorporated association. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

(Signature of applicant)

(Full name of TAFE Institution)

(Position/Title)

(Date)

Please fax or email your completed application form.
Once approved, an invoice will be sent to you for payment.

Fax: (02) 9281 7335 | Email: memberservices@tda.edu.au