Membership Application Form

## Personal Details

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | Your first and last name | Date: | Click here to enter a date. |
| Business Name: | Your Business name |
| Address: | Number and Street Name |
| Suburb, State and Postcode |
| Telephone (H): | Click here to enter text. |
| Telephone (M): | Click here to enter text. |
| Telephone (B): | Click here to enter text. |
| E-mail: | Your business e-mail |
| How did you hear about us? | How did you find out about The Millinery Association of Australia? |

## Experience

Minimum Certificate II in Millinery or equivalent.

Formal millinery qualification/workroom experience:

* Please include details of experience to date & relevant study undertaken.
* List who you have studied with & for how long.
* Include at least 4 photographs of your work. If you would like photos to be returned, please included a stamped self-addressed envelope
* Attach additional pages as required

|  |
| --- |
| Tell us about your training, workroom experienceInclude 4 photos of your work |

## References:

* Please include a letter of recommendation/accreditation from your teacher/s or another relevant millinery referee.

Referee 1

|  |  |
| --- | --- |
| Name: | Click here to enter text. |
| Contact Number: | Click here to enter text. |
| E-mail address: | Click here to enter text. |

Referee 2

|  |  |
| --- | --- |
| Name: | Click here to enter text. |
| Contact Number: | Click here to enter text. |
| E-mail address: | Click here to enter text. |

**Website Consent**

Do you consent to have your details on the website?

<http://millineryaustralia.org/milliners/>

|  |  |
| --- | --- |
| [ ] Yes | [ ] No |

**Process of Applying for Membership**

1. Complete this application form with letter of recommendation/accreditation
2. Submit application to

secretary@millineryaustralia.org

OR

The Secretary

Millinery Association of Australia

P.O. Box 184

West Brunswick Vic 3055

1. Committee will process and advise:

The application has been accepted and request payment of $120

OR

The application requires more information

OR

The application has been rejected

**Fees**

Annual fee: $120.00 (annual fee of $100.00 and joining fee $20.00)

Note: Membership commences from the date of the Treasurer receives membership levies, and is current till the date of the next annual general meeting which is held annually in November.

Committee use only

|  |  |  |  |
| --- | --- | --- | --- |
| Date application received:  |  | Received by: |  |
| Date application processed:  |  | Processed by: |  |
| Outcome: | Approved Rejected |
| Date letter to applicant issued: |  | Issued by: |  |
| Date fee received:  |  | Received by: |  |
| Date listed on membership register: by |  |