

Office Use Only:



▶ Please use BLOCK LETTERS when completing this form.

Plastics Industry Manufacturers of Australia

Membership Application

1. YOUR DETAILS

Title: Dr Mr Mrs Miss Ms Other:

Your Name:

Company Name:

Postal Address:

City/Suburb: Postcode:

Phone Number: () ▶ Please include area code

Fax Number: ()

Email:

Website:

2. MEMBERSHIP TYPE

▶ Please tick: GST Incl. Full Member \$300 pa Corporate Associate Member \$220 pa Associate Member \$110 pa

3. TRADE DIRECTORY

Would you like to list your organisation and contact details on the PIMA Trade Directory?

▶ Please tick: Yes No This is a FREE listing.

4. DECLARATION

"I / We hereby make application for membership to the Plastics Industry Manufacturers of Australia (PIMA) and agree to abide by the Rules and Regulations which govern it."

Signature:

Date: / / 2 0 0 ▶ dd/mm/yyyy

Please forward this application to PIMA, to:

The Secretary, PIMA
PO Box 324
Lidcombe NSW 2141

or email: pima@pima.asn.au