

THE COMPANY OF MASTER MARINERS OF AUSTRALIA LTD

ACN 008 643 552 ABN 64 008 643 552



APPLICATION FOR MEMBERSHIP

I (Name in full) :		Apply for :		(type of) membership.	
Branch:		of the - Company of Master Mariners of Australia.			
Address (for all communications) :					
Postcode :		Home Tel:		Bus Tel:	
E-mail address :			Mobile Phone :		
Birthplace – City :		Country :		Date :	
Masters Cert No. (as applicable) :		Date Obtained :		Place :	
Associate - Qualification :		No. :		Date :	
Present Rank (if at sea) :		Ship :			
If not at sea:		Company :			
Occupation :		Position Held :			
Please attach brief CV of your involvement in the maritime industry....					
<p>I acknowledge that the Certificate of Membership, which may be issued to me is at all times the property of the Company, and I hereby undertake to return same to the Secretary of the Company if requested. Acceptance of membership is subject to the appropriate clauses as per the Constitution of The Company.</p>					
Signature of applicant :				Date :	
Proposer Name :		Signature :		Roll No. :	
Seconder Name :		Signature :		Roll No. :	
<p>I hereby certify that I have sighted the FG Master's Certificate / Master Class 1 / Appropriate Application of the above applicant in accordance with the Constitution of The Company of Master Mariners of Australia.</p>					
Signature of Branch Court Member :				Date :	

Nomination Fee of \$80 to be forwarded with application

BRANCH COURT: Please fill details below concerning Reading dates and return as soon as possible		
Readings – Branch :	1 st Reading Date :	2 nd Reading Date :
Ratified - Federal Court – Date :	Certificate Forwarded - Date :	Roll No. :