



## Affiliate Membership Application

Affiliate Membership is offered to persons working in industries ancillary to stockbroking and financial advising.

### Applicant Details

Title \_\_\_\_\_ First Name(s) \_\_\_\_\_

Surname \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Mobile \_\_\_\_\_

Work email (for database records) \_\_\_\_\_

Private email (in the event you change your place of work) \_\_\_\_\_

### Employer Details (if relevant)

Name of Employer \_\_\_\_\_

Your position \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Work Telephone ( ) \_\_\_\_\_

### Membership Fees

Membership Type	Annual Membership Fee (incl. GST)	Postnominal
Affiliate	\$395.00	Affiliate Member of SAFAA (AfSAFAA)

### Payment Details

Mastercard     Visa Card     American Express

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_ / \_\_\_\_ CVV: \_\_\_\_\_

Cardholders Name: \_\_\_\_\_ Total: \$ \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

***Payment details must be supplied at time of application. Card will be charged and a tax receipt issued when the application is approved.***

## **Applicant Declaration**

I agree to be bound by the terms and conditions of the Stockbrokers And Financial Advisers Association Constitution, Rules, Code of Ethical Conduct, and any policies and guidelines issued by the Stockbrokers And Financial Advisers Association (*as amended from time to time*).

Signed by applicant \_\_\_\_\_ Date \_\_\_\_\_

Please email completed application form to [membership@stockbrokers.org.au](mailto:membership@stockbrokers.org.au)

*Membership is at the discretion of the Stockbrokers And Financial Advisers Association Board of Directors.*

*The Association complies with the Privacy Act 1988 in handling all information provided by members.*