



Commercial Asset Finance Brokers Association of Australia Limited

ABN 32 129 490 133

APPLICATION FOR ASSOCIATE MEMBERSHIP

Date.....

Name of Applicant(please print)

Business Address.....

.....Postcode.....

TelephoneFaxMobile

E-Mail (please print clearly)

I am currently a broker / business writer / employee (please circle) engaged in equipment finance broking with the company named below.

I have attached a current Police record check, credit check and signed Code of Conduct to this application (the link to all can be found via the CAFBA website – this application will not be processed without this information)

I hereby agree to be bound by the Association's Rules and Code of Conduct Please Note: This application may be circulated to financiers and CAFBA committee

Signature of applicant.....

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I .....(please print)

hereby nominate .....(please print)

as an Associate Member of The Commercial Asset Finance Brokers Association of Australia Limited and verify that he / she is a broker / business writer / employee (please circle) engaged in equipment finance broking with the company named below.

The applicant named above has attached their Police record check, credit check and signed Code of Conduct to this application. (This application will not be processed without this information)

Company.....

Business Address.....

..... Postcode .....

Telephone .....Fax .....Mobile .....

E-Mail (please print clearly).....

We hereby agree to be bound by the Association's Rules and Code of Conduct Please Note: This application may be circulated to financiers and CAFBA committee

Signature of person nominating the applicant.....