

## **Application for ASIEQ Ordinary Membership**

Details of Applicant		
Organistation Name:		
Postal Address:		
Details of Nominated Representatives		
Representative 1 - (Primary Contact)		
Name:	Title:	
Phone:	Facsimile:	
Email:		
Representative 2		
Name:	Title:	
Phone:	Facsimile:	
Email:		
Does your organisation have over 1000 fulltime employees in Queensland?		☐ Yes ☐ No
<ul> <li>By completing and signing of this application, the above named applicant confirms that it is: -</li> <li>A licenced Self-Insurer under the Workers' Compensation and Rehabilitation Act 2003; or</li> <li>In the process of becoming a Self-Insurer under the Workers' Compensation and Rehabilitation Act 2003; or</li> <li>An employer with over 1000 employees in Queensland and has an interest in the aims of the Association, self-insurance and/or employer based injury management.</li> </ul>		
The applicant hereby applies for membership of the Association of Self Insured Employers of Queensland. If accepted as a member of the Association, the applicant agrees to abide by the Associations Constitution and Rules.		
Name of person signing on behalf of the applicant:		
Position:		
Signature:		

will issue an invoice within 7 days. The current Fee for Ordinary Membership is \$1,760.00 (+ GST). Invoices will be pro rata from 1 October.

The Executive of the Association will consider the application within 14 days and if accepted the secretariat

Please return the completed application form to the ASIEQ Secretariat at Suite 375, Level 1, 241 Adelaide Street, Brisbane QLD 4000, fax to 07 5429 8486 or email <a href="mailto:admin@asieq.com.au.">admin@asieq.com.au.</a>.