

www.ahsca.org.au

## APPLICATION FOR AHSCA MEMBERSHIP (Rev C)

(for individuals not sponsors)

Given Name(s): Surname:			
Name of Practice / Firm:			
Address for Correspondence:			
	Post Code:		
Occupation:	Years Experience:		
Telephone (BH): Email:			
Membership Category Requested: Associate Member (see footer for description)	Mem	ber	
Student Member	Plum	bing Inspector	
Were (are) you already an AHSCA member?	If Yes, what State		
The name and signature of two (full) members of the AHSCA personally known to me are indicated hereunder: (IF NONE KNOWN, LEAVE BLANK FOR AHSCA CONSIDERATION AND PROVIDE DETAILS FOR 2 REFERENCES ON NEXT PAGE)			
Nominated By (print):	Signature:		
Seconded By (print):	Signature:		

For Membership; please provide a copy of your Resume detailing your qualifications, projects and experience.

ASSOCIATION OF HYDRAULIC SERVICES CONSULTANTS AUSTRALIA / AHSCA RESEARCH FOUNDATION LTD (ACN 614 206 521)



www.ahsca.org.au

PROFESSIONAL REFERENCES		
If the applicant is unable to secure nomination from existing AHS details for at least 2 professional references.	CA members	s please provide contact
Reference 1 (print):	Email:	
Reference 2 (print):	Email:	
DISCLOSURE: The information provided in this membership application is true information provided may be used to contact nominators, second courses run by the AHSCA / AHSCA Research Foundation are therefore not always available in each State or Territory. I further usubject to successful completion of training courses and demonstrate performance based design techniques. I authorize the AHSCA to matters, courses and endorsed promotions.	ders or refere e limited to nderstand us ration of prof	ences. I understand that minimum numbers and the of online calculators is iciency in traditional and
I understand that AHSCA (Logo) Trademark and Wordmark (AFResearch Foundation and that limitations on member use exist a time to time.		
FREE PLUMBING CONNECTION SUBSCRIPTION I wish to enroll in the free Plumbing Connection subscription as facilitate this the AHSCA will provide Patchell Publishing with the provided on this form. (If other address is preferred please provide)	ne "Address	
Cost of Membership: \$150.00 Australian Dollars per Annum (non-v	oting membe	ership category).
Signature of Applicant:	Date:	

Please email your application to secretary@ahsca.org.au.