



## MEMBERSHIP APPLICATION FORM

Applicants seeking Membership as an Associate or Student should only complete Sections A, B, D and E.  
Applicants seeking Membership as a Member or Fellow should complete all Sections and attach a copy of your CV and a certified copy of relevant qualifications.

**PART A**

**PERSONAL DETAILS** (PLEASE USE BLOCK LETTERS)

Surname  Given Names   
(Mr, Mrs, Ms etc)

Date of Birth  Email

Mailing Address

Telephone (Daytime)  Mobile

**PRESENT EMPLOYMENT**

Name of Employer  Job Title

Suburb  Postcode  Date Appointed

**PART B**

**EDUCATIONAL QUALIFICATIONS**

From	To	University, TAFE etc	Degree, Diploma, Professional Qualifications
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**INDUSTRY EXPERIENCE**

Dates		Job Title	Name of Employer
From	To		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PART C

**PROPOSERS AND SECONDRERS**

Proposers and seconders must hold the appropriate grade of membership as shown below.

For FELLOW Two Fellows  
For MEMBER, ASSOCIATE OR STUDENT Two Fellows or two Members or a combination thereof

We hereby recommend the above applicant for election / transfer (please delete) as outlined above.

Signature of Proposer  Membership Grade

Name (block Letters)  Date

Signature of Seconder  Membership Grade

Name (block letters)  Date

PART D

**APPLICANT'S DECLARATION**

I hereby apply for (election) / transfer to the grade of:

Student  Associate  Technical Member  Member  Fellow

I certify that the statements made by me in this application are correct and should I be admitted, will abide by the Institute's Code of Conduct.

Signed ..... Date .....

PART E

**PAYMENT BY: MASTERCARD / VISA / AMERICAN EXPRESS**  
(we do not accept Diners Club card)

**\$50.00** .....

Cardholder's Name  Cardholder's Signature

Card Number  Expiry Date  /

I would like to know more about/ join the Young Members Network (YMN) Yes  No

I would be interested to upgrade my membership during the next 12 months Yes  No

**PLEASE FORWARD YOUR APPLICATION TO:**

Your Local Institute Branch  
(see [www.quarry.com.au](http://www.quarry.com.au) for details)

or

Membership Service Co-ordinator  
PO Box 6447  
North Ryde NSW 2113  
email: [admin@quarry.com.au](mailto:admin@quarry.com.au)

**FOR OFFICE USE ONLY**

Membership Committee Comments

Chairman's Signature

Membership Number  Branch

## **PRIVACY OF YOUR PERSONAL INFORMATION**

The Institute of Quarrying (IQA) is committed to handling your personal information in accordance with the Privacy Act.

### Collection, Use and Disclosure of your Personal Information

By providing your personal information you acknowledge and declare that, and consent to:-

1. IQA collecting and using your personal information for the following purposes:
  - a. To assess your current and subsequent application
  - b. To update your information
  - c. To provide branches with your details for IQA and IQA approved functions and activities
2. IQA collecting your personal information from, and disclosing it on a confidential basis to, the following:
  - a. IQA related entities – CP Board (QMCS), AIQEF, Committees and Council
  - b. IQA contracted agents and third parties – Professional conference organisers, Quarry Magazine publisher and Suppliers (for Industry Award purposes)
  - c. Government departments and agencies (under law), law enforcement agencies, investigators, lawyers and medical providers (under law)
3. IQA Products, Services and Marketing as follows:
  - a. To provide information and offers about a range of products and services offered by us and our related entities whose products and services we promote
  - b. For industry development and market research

You will inform IQA if you do not want your personal information to be used or disclosed to our related entities

If in doubt about these protocols or about the Privacy Act and its application, you are encouraged to seek guidance from the IQA Company Secretary.

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