

# APPLICATION FOR CORPORATE MEMBERSHIP 2018

Annual ASPAC Corporate Membership is available for laboratories and organisations involved in soil and plant analysis. A separate membership is required for each laboratory.

Corporate membership fees for the **2018 calendar year**: Australian Corporate Members AUD400+GST; International Corporate Members AUD400 (nil GST).

**Please complete this application form and forward to:**

**ASPAC Executive Officer (Attn: Warren Webber), 7 Benham Road, RD 4, Rotorua 3074, New Zealand.**  
Or scan and email to: [wwebber@outlook.co.nz](mailto:wwebber@outlook.co.nz) The Executive Officer can also be contacted on +64 27 478 7758.

Please note: Corporate membership is a **prerequisite for participation in the ASPAC Laboratory Proficiency program** which is managed through Global Proficiency, Hamilton, New Zealand, on payment of an additional annual fee which is determined from time to time by Global Proficiency (Contact: Lana Pears, email [Lana.Pears@Global-Proficiency.com](mailto:Lana.Pears@Global-Proficiency.com)). The successful completion of ASPAC Proficiency Program requirements will qualify for annual accreditation under this program.

**Company Name:** \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Town/City \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

**Name of Primary Contact:** \_\_\_\_\_

Position held in organisation: \_\_\_\_\_

Email: \_\_\_\_\_

Tel: ( \_\_\_\_ ) \_\_\_\_\_

Mobile: ( \_\_\_\_ ) \_\_\_\_\_

Fax: ( \_\_\_\_ ) \_\_\_\_\_

**Name of Second Contact:** \_\_\_\_\_

Position held in organisation: \_\_\_\_\_

Email: \_\_\_\_\_

Tel: ( \_\_\_\_ ) \_\_\_\_\_ Mobile: ( \_\_\_\_ ) \_\_\_\_\_

BUSINESS: (How it relates to soil and plant analysis)

\_\_\_\_\_

\_\_\_\_\_

On behalf of the organisation, I agree to abide by the Rules and uphold the Objectives of ASPAC.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2018 Corporate Membership Fees will be invoiced once the membership application has been approved.

**REFEREE:** (Applicants are required to provide the name of one referee who is an ASPAC financial member)

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**FOR OFFICE USE ONLY: Application Acceptance:**

ASPAC Executive member: \_\_\_\_\_ Date: \_\_\_\_\_