



# AIMPE

Australian Institute of  
Marine and Power Engineers

## APPLICATION TO JOIN AIMPE

Applicant's Date of Birth		
Applicant's SURNAME		
Applicant's FIRST NAMES		
Applicant's Address (Number, Street Name or PO Box etc.,)		
Applicant's Suburb		
Applicant's State, Postcode, Country		
Applicant's Phone	Home:	Mobile:
Applicant's Email		
Applicant's trade & marine qualifications (attach copies)		
Applicant's current employer		
Applicant's current job or position		
Applicants right to work in Australia		<i>please attach copy – birth certificate, passport, permanent residency etc</i>
Applicant's signature		Date:
Note	<i>This application form is a Proposition Form under the AIMPE Rules. By completing and signing this form the applicant agrees to abide by all the AIMPE Rules and the Fair Work legislation.</i>	
MEMBER proposing the application for membership	Name	Membership No
	Signature	
MEMBER seconding the applicant for membership	Name	Membership No
	Signature	
<b>OFFICE USE ONLY</b>		
Member Number		Category:

52 Buckingham Street, Surry Hills, N.S.W. 2010

Telephone: +61 2 9319 5569

[www.aimpe.asn.au](http://www.aimpe.asn.au)