



AAA MEMBERSHIP APPLICATION FORM

Applicant Details

Contact: _____

Title: _____

Company: _____

Business Address: _____

Mailing Address (if different): _____

State: _____

Postcode: _____

Telephone: _____

Facsimile: _____

Mobile _____

E-mail: _____

Website: _____

Membership Category

Please tick the appropriate box:

<input checked="" type="checkbox"/>	CATEGORY	DESCRIPTION	MEMBERSHIP FEE
REVENUE PASSENGER TRANSPORT CERTIFIED AIRPORTS			
<input type="checkbox"/>	A1	Over 25 mil	\$50,000* + GST
<input type="checkbox"/>	A2	20-25 mil	\$50,000* + GST
<input type="checkbox"/>	A3	12.5-20 mil	\$50,000* + GST
<input type="checkbox"/>	A4	7.5-12.5 mil	\$50,000* + GST
<input type="checkbox"/>	A5	5-7.5 mil	\$35,000 + GST
<input type="checkbox"/>	A6	3-5 mil	\$25,000 + GST
<input type="checkbox"/>	A7	1.5-3 mil	\$17,500 + GST
<input type="checkbox"/>	A8	1-1.5 mil	\$12,500 + GST
<input type="checkbox"/>	A9	750,000-999,999	\$10,000 + GST
<input type="checkbox"/>	A10	500,000-749,999	\$8,000 + GST
<input type="checkbox"/>	A11	250,000-499,999	\$6,000 + GST
<input type="checkbox"/>	A12	100,000-249,999	\$5,000 + GST
<input type="checkbox"/>	A13	50,000-99,999	\$3,500 + GST
<input type="checkbox"/>	A14	20,000-49,999	\$2,500 + GST
<input type="checkbox"/>	A15	5,000-19,999	\$2,000 + GST
<input type="checkbox"/>	A16	Under 5,000	\$1,100 + GST
NON- REVENUE PASSENGER TRANSPORT CERTIFIED AIRPORTS			
<input type="checkbox"/>	A17	Over 100,000 Flights	\$5,000 + GST
<input type="checkbox"/>	A18	50,000-99,999	\$3,500 + GST
<input type="checkbox"/>	A19	10,000-49,999	\$2,000 + GST
<input type="checkbox"/>	A20	0-9,999	\$1,500 + GST

<input checked="" type="checkbox"/>	CATEGORY	DESCRIPTION	MEMBERSHIP FEE
NON-CERTIFIED AERODROMES			
<input type="checkbox"/>	A21	>20,000 Population	\$1,000 + GST
<input type="checkbox"/>	A22	15,000-19,999	\$700 + GST
<input type="checkbox"/>	A23	<15,000	\$500 + GST

Airport Name (1)

No. of Annual Passenger Movements: _____ No. of Air Movements: _____
 Population of Local Government Area: _____

Airport Name (2)

No. of Annual Passenger Movements: _____ No. of Air Movements: _____
 Population of Local Government Area: _____

<input checked="" type="checkbox"/>	CATEGORY	DESCRIPTION	MEMBERSHIP FEE
CORPORATE			
<input type="checkbox"/>	C24	1-5 Staff	\$900 + GST
<input type="checkbox"/>	C25	6-30 Staff	\$1,490 + GST
<input type="checkbox"/>	C26	30+Staff	\$1,990 + GST
INDIVIDUAL			
<input type="checkbox"/>	I27	Individual	\$250 + GST

Brief Description of Company

Payment Details

Enclosed is a:

- Cheque (Cheque/Money Order payable to Australian Airports Association)
- Money Order
- EFT Payment (Details are available from the AAA Secretariat)

For \$ _____

A copy of this Application Form can be mailed, scanned and emailed or faxed to:

AAA Secretariat Manager Email: msummers@aiports.asn.au
 PO Box 3004 Fax: 02 6230 1637
 CANBERRA AIRPORT ACT 2609 Phone: 02 6230 1110

I hereby apply for membership of the AAA and confirm that the above details are correct and true. If accepted, I agree to abide by the constitution of the AAA.

SIGNATURE _____ DATE _____