

STUDENT MEMBERSHIP APPLICATION AND RENEWAL APPLICATION

Name of Applicant: Address:

Tel: Mob: Email Address:

1. I apply to the Australian Valuers Institute for student membership of the association.

2. The following professionals can confirm my personal and professional reputation:

Name: (1) (2)
 Firm:
 Address:
 Tel:

3. I am the member of the following occupational associations:

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4. I certify that I will comply with the AVI Code of Ethics and Rules of Conduct that apply to me.

5. I consent to the AVI using email or post to contact me in relation to AVI matters, industry news, conferences and seminars.

6. I provide the following details in relation to my current enrolment in a Property Valuation course approved by the State Government as being satisfactory to enable myself to graduate, in due course, with valuation registration qualifications.

Institution:

Course Name:

Student Number:.....

Current Enrolment Year:.....

7. I consent to the AVI contacting the above institution to confirm my enrolment.

8. I certify that the information in this application is true and correct and attach herewith the application fees.

Tax Invoice
Annual Subscription \$30.00

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Date Signature Applicant Witness Signature & Name

AUSTRALIAN VALUERS INSTITUTE CO-OP LIMITED ABN: 19 371 614 632

DIRECT DEPOSIT DETAILS

Bank: Westpac BSB: 032 083
Account Name: Australian Valuers Institute Co-op Ltd Account Number: 51 0220