



FIREWOOD ASSOCIATION  
OF AUSTRALIA INC™

**APPLICATION FOR AFFILIATE MEMBERSHIP OF THE  
FIREWOOD ASSOCIATION of AUSTRALIA INC.**

\_\_\_\_\_  
(Name or Business Name)

of \_\_\_\_\_  
(Address)

ABN: \_\_\_\_\_ PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_ MOBILE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

wishes to apply to become an affiliate member of the Firewood Association of Australia Inc.

If my/our application is accepted, I/we agree to be bound by the FAA Rules of Association.

If my/our application is accepted, we agree to use the relevant FAA logo or mark in accordance with the guidelines and restrictions stated in Appendix 4 of the FAA Rules of Association.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**For enterprise applicants**

Our nominated representatives are;

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Name)

I/we understand that affiliate members and their nominated representatives are not entitled to hold office or vote at meetings of the Association.

Please mail this form with the Application Fee (\$266 inc GST - a Tax Invoice will be provided) or fax to 03 9611 9080 and pay Application Fee by EFT to:-

Account: Firewood Association of Australia Inc.  
BSB: 013 259 Account Number: 495996283