



APPLICATION FOR MEMBERSHIP OF

**AMMPT SOUTHERN REGION (Inc.)** and  
**THE AUSTRALIAN MUSEUM OF MOTION PICTURE & TELEVISION (Inc.)**

ABN 73 111 667 924

Preserving and promoting the rich heritage of Australia's Film, Television and kindred media industries  
and using the **AUSTRALIAN MEDIA MUSEUM** for its display

I..... or company/entity.....  
(Insert Applicant's full name- please print) Nominee .....

of.....Postcode .....  
(Insert Applicant's residential or postal address)

Ph. (....).....Mob..... Email .....Fx. (....).....

apply to become a Member ☐ Corporate Member ☐ Student Member ☐ Associate Member ☐ Associate Group Member ☐

of the above Associations. ( tick category of Membership sought. – See reverse side for definition of Membership categories )

Area of special interest or expertise : .....  
.....  
.....

Privacy Act: Please tick this box if the applicant agrees to have his/her membership details being made public ☐

Signature:..... Date:.....

A person or entity who wishes to become a member must be proposed by a member and seconded by another.  
If unable to locate existing members, applicant to supply names and contact details of two industry related referees.

PROPOSED by:  
Name (please print) .....

SECONDED by:  
Name (please print) .....

Signature:.....

Signature:.....

Date:.....

Date:.....

Please indicate how you can help the Australian Media Museum :

If you are a collector of media technology, will you consent to being listed on our REGISTER of COLLECTORS ( with complete discretion and privacy assured ) ?

If so, what are the broad themes or specialties of your collection ?

Details confirmed by Regional Secretary

Signed..... Date.....

Please ensure all contact details above are legible before processing

Office use only:

Date Approved

Membership Category

Membership Number

INFORMATION for APPLICANTS – see Reverse side of form