



AUSTRALIAN INDUSTRY & DEFENCE NETWORK

MEMBERSHIP APPLICATION FORM

All information supplied on this form remains private and confidential

Company Name: _____

ABN: _____ Web Page: _____

Address: _____

City: _____ State: _____ Postcode: _____

Phone Number: _____

Postal Address: _____

City: _____ State: _____ Postcode: _____

Key Contact Name and Position: _____

Email: _____ Mobile: _____

Accounts Payable Contact/Email: _____

No. of Employees: Up to 10 11-50 51-100 101-200 over 200

Turnover (per annum): Up to \$500k \$500k-\$5M \$5M-\$20M over \$20M

Australian Owned: Yes No Veteran Owned: Yes No

Indigenous Owned: Yes No Female Owned: Yes No

Exports are: _____ % of turnover

Primarily to which region/s do you export? _____

Product Categories:

- | | | |
|---|---|--|
| <input type="checkbox"/> Aerospace | <input type="checkbox"/> C4I | <input type="checkbox"/> Catering & Food |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Electronic Systems | <input type="checkbox"/> Engineering/Fabrication |
| <input type="checkbox"/> Information Technology | <input type="checkbox"/> Marine | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Miscellaneous | <input type="checkbox"/> Personnel Support |
| <input type="checkbox"/> Procurement | <input type="checkbox"/> Publications | <input type="checkbox"/> Research & Development |
| <input type="checkbox"/> Sensor Systems | <input type="checkbox"/> Services | <input type="checkbox"/> Space |
| <input type="checkbox"/> Textile/Clothing | <input type="checkbox"/> Training | <input type="checkbox"/> Vehicles |
| <input type="checkbox"/> Weapons | <input type="checkbox"/> Other: _____ | |



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We recommend that you use words in the following sections that would most commonly be used by buyers of your products as they will be used as the basis for a word search facility.

Please list 4 of your company's major products or services

Brief selling message about your company (not more than 200 words)

TERMS AND CONDITIONS

By completing this AIDN Membership Application, I agree to the following terms & conditions:

- As a member I shall abide by the rules of AIDN as set out in the Constitution.
- As a member I shall abide by the AIDN Code of Conduct.
- I authorise AIDN to make my business name & address available to relevant organisations, individuals & the AIDN website database at the discretion of the board.

Name: _____ Date: _____

Signature: _____

Send the completed application to info@aidn.org.au and AIDN will advise the membership price and issue you with an invoice. Once the invoice has been paid and the funds have cleared our bank account you will be added to our distribution list.