



## APPLICATION FOR MEMBERSHIP

Member Code

.....

Date Accepted

.....

I/We: \_\_\_\_\_

Of: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company name to appear on certificate: \_\_\_\_\_

**Postal Address:**

**Physical Address:**

PO Box: \_\_\_\_\_

Street: \_\_\_\_\_

Mail Centre: \_\_\_\_\_

Suburb/RD: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

Name/s of director/s (if limited Liability Company)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Date business established \_\_\_\_\_

Or: if taken over, from \_\_\_\_\_ on (date) \_\_\_\_\_

**CONTACT INFORMATION** (This information, along with your company name, postal address and primary contact will be published in the AIA membership Directory and on the AIA website, www.aia.org.nz, under the members' login page. Please indicate **Y** or **N** to this advertising.)

**Generic Email:** \_\_\_\_\_ **Ph:** \_\_\_\_\_ **Website:** www. \_\_\_\_\_

**Primary Contact:**

Name: \_\_\_\_\_ Designation: \_\_\_\_\_ DDI: \_\_\_\_\_

Fax: \_\_\_\_\_ Mob: \_\_\_\_\_ Email: \_\_\_\_\_

**Secondary Contact:**

Name: \_\_\_\_\_ Designation: \_\_\_\_\_ DDI: \_\_\_\_\_

Fax: \_\_\_\_\_ Mob: \_\_\_\_\_ Email: \_\_\_\_\_

I/we, having met the criteria as stated under Rule 3 'Ordinary Members' and Rule 6 'Membership' in the Aviation Industry Association of NZ (Inc) (AIA) Rules & Bylaws, do hereby apply for membership of the AIA under the division/s indicated below:

ORDINARY MEMBERS – Rule 6.1					SPECIAL MEMBERS – 6.2			
Rule No.	AIRCRAFT OPERATOR DIVISIONS Section 1	✓	Rule No.	SUPPORT & LOGISTICS DIVISIONS	✓	Rule No.		✓
3.2.1	NZ Agricultural Aviation Assoc. (NZAAA)		3.2.4	Airports (AP) Section 2, pg 2		6.2.2	Associate * (AS)	
3.2.2	Air Rescue/Air Ambulance (AR/AA)		3.2.5	Education & Research (E&R)		6.2.3	Honorary * (H)	
3.2.3	Air Transport (AT)		3.2.6	Aircraft Engineers Association of NZ (AEANZ) Section 3, pg 3		6.2.4	Pilot * (P)	
3.2.7	Flight Training (FT)		3.2.9	Supply & Services (S&S) Section 4, pg 3		6.2.4	Individual * (I)	
3.2.8	NZ Helicopter Association (NZHA)							
3.2.10	Tourist Flight Operators (TFO)							

\* If applying for membership under **Category Rule 6.2** please indicate with an **X** next to the division you are affiliated to.

Entered in Database: \_\_\_\_\_  
 Added to web site: \_\_\_\_\_  
 Invoice # \_\_\_\_\_  
 Welcome Letter sent: \_\_\_\_\_  
 Cert/Ann Rep/Mbr Dir: \_\_\_\_\_

**Section 1: AIRCRAFT OPERATOR DIVISIONS** (NZAAA - AR/AA - AT - FT - NZHA - TFO)

Operating Region/s: \_\_\_\_\_  
 \_\_\_\_\_

Physical address/es of the company's operations base/s:

1. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Operations Base Phone No/s and personnel:

Phone: \_\_\_\_\_

Ops Manager: \_\_\_\_\_

Chief Pilot: \_\_\_\_\_

Phone: \_\_\_\_\_

Ops Manager: \_\_\_\_\_

Chief Pilot: \_\_\_\_\_

Phone: \_\_\_\_\_

Ops Manager: \_\_\_\_\_

Chief Pilot: \_\_\_\_\_

Phone: \_\_\_\_\_

Ops Manager: \_\_\_\_\_

Chief Pilot: \_\_\_\_\_

**Operating Aircraft (owned / leased)**

Number of FW aircraft <15 seats	
Number of FW 15-35 seat aircraft	
Number of FW >36 seat aircraft	
Number of Helicopters	
<b>Total Number of all aircraft</b>	

*If this is the only division applied for, go to **UNDERTAKING** pg 3*

**Section 2: AIRPORTS DIVISION**

**Airports/Aerodrome/s operated:**

Name of Airport/Aerodrome: \_\_\_\_\_ Location: \_\_\_\_\_

Name of Airport/Aerodrome: \_\_\_\_\_ Location: \_\_\_\_\_

Name of Airport/Aerodrome: \_\_\_\_\_ Location: \_\_\_\_\_

Name of Airport/Aerodrome: \_\_\_\_\_ Location: \_\_\_\_\_

**Number of Passengers per annum:** \_\_\_\_\_

*If this is the only division applied for, go to **UNDERTAKING** pg 3*

**Section 3: AIRCRAFT ENGINEERS ASSOCIATION of NZ DIVISION**

Ratings: What licences and/or approved ratings from CAA are currently held? \_\_\_\_\_

**Employee numbers:**

Licensed Engineers	
Trainees/Apprentices	
Administration	
Other	
<b>Total Number of employees</b>	

<b>AEANZ membership categories</b>	<b>✓ category</b>
Largest company	
Large company	
Medium company	
Small company	
Individual membership LAME/AME	
Associate ( <i>engineering support company</i> )	
Trainee ( <i>employed by an AEC</i> )	*
Student ( <i>not employed by an AEC</i> )	*
Other ( <i>by application to council</i> )	*

**\*NB trainee or student membership evidence must be provided**

Do you undertake work and provide services for the industry in any of the following? Please ✓

- Repair:
- Maintenance:
- Manufacturing:

*If this is the only division applied for, go to **UNDERTAKING** (below)*

**Section 4: SUPPLY & SERVICES DIVISION**

Do you carry stocks of aircraft spares or materials? **Y / N**

Types or range: \_\_\_\_\_

What (other) services and/or supplies do you offer the aviation industry? \_\_\_\_\_

**Total number of employees:** \_\_\_\_\_

*If this is the only division applied for, go to **UNDERTAKING***

**Section 5: ASSOCIATE MEMBERSHIP**

All persons (except those excluded by rule 6.3), firms, companies, trusts or corporations actively engaged in the aviation industry and not covered by a division as provided in rule 3, shall be eligible for membership as associate members.

*Admittance as an associate member requires a special application to the AIA Council.*

**UNDERTAKING**

**NB:** Applicants for NZAAA, NZHA or AEANZ divisions will be required to supply specific information for these divisions.

To be signed by all Applicants.

I/we undertake, in the event of my/our election to membership, to pay the annual subscription for the division or divisions of Membership to which I/we are elected and, if required, to join the Branch of the Association whose territory includes our address as shown in this application.

Having read and accepted the Rules and Bylaws s (attached) of the AIA, if elected to membership, I/we hereby agree to abide by same and further, I/we agree to adhere to any decision made, or agreement entered into, by the AIA.

Signature of person authorised to sign: \_\_\_\_\_

Qualification to sign: \_\_\_\_\_

*Status in company etc.*

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