

THINK BRICK ASSOCIATE MEMBERS APPLICATION

To: The Administration Manager Think Brick Australia (the company)

Name of Applicant (the applicant):

ABN:

Address:

Postal Address:

Telephone:

Facsimile:

Email:

Website:

Name of Representative:

Position held by Representative:

Home Address of Representative:

The Applicant hereby applies to become an Associate of the Company as defined in the Constitution of the Company. The Applicant hereby undertakes and agrees that if it is accepted as an Associate of the Company it will be bound by the Constitution of Association of the Company from time to time in so far as they apply to Associates. The Applicant undertakes and agrees that if it is accepted as an Associate it shall promptly pay to the Company upon request all fees which are due and payable from time to time by it as an Associate.

The Applicant acknowledges that it has received and read a copy of the Constitution of the Company prior to the making of this Application.

The applicant hereby appoints the Representative as its duly authorised representative to deal with the Company and to do all other things on its behalf relating to the Applicant's rights and obligations as an Associate of the Company. This authority shall continue unless and until the Applicant has given notice to the Company of its revocation or of any limit or qualification to the authority of the Representative.

Date of Application:

Signed:

Being a duly authorised signatory of (Applicant):

I hereby consent to acting as the Representative of the abovenamed Applicant for all the purposes of its status as an Associate of the abovenamed Company and for all the purposes of the Constitution of the abovenamed Company and to accept service of all notices on behalf of the Applicant from the abovenamed Company.

Dated:

Signed:

Office use only:

RECOMMENDED BY TBA BOARD:

Director:

Member Company:

Director:

Member Company: