



Society of Auctioneers & Appraisers (SA) Inc.

22 Greenhill Road, Wayville SA 5034 • Tel 8372 7830 • Fax 8272 7545 • Email society@auctioneers.com.au
Web: auctioneers.com.au

Membership Application Consultant Practicing

Consultant Practicing Membership is for employees who are primarily engaged in performing the functions and duties of an Auctioneer, Appraiser, Agent or Property Manager on behalf of an employer who is a Member of the Society of Auctioneers and Appraisers (SA) inc.

reaforms (AucDocs) is not available to Consultant Practicing Members.

To the Secretary, Society of Auctioneers & Appraisers (SA) Inc., 22 Greenhill Road, Wayville SA 5034.

I hereby apply to be admitted as a Consultant Practicing Member and state that the following details are true and correct:

| | | | |
|--|----------------------|---|----------------------|
| Surname (Mr/Mrs/Ms) | <input type="text"/> | Given Names | <input type="text"/> |
| Date of Birth | <input type="text"/> | Preferred First Name for Membership Directory | <input type="text"/> |
| Group Name | <input type="text"/> | Company Name | <input type="text"/> |
| Address | <input type="text"/> | Postcode | <input type="text"/> |
| Mailing Address | <input type="text"/> | Postcode | <input type="text"/> |
| Phone | <input type="text"/> | Fax | <input type="text"/> |
| | | Mobile | <input type="text"/> |
| Email | <input type="text"/> | Web | <input type="text"/> |
| Home Address | <input type="text"/> | Postcode | <input type="text"/> |
| Phone | <input type="text"/> | Fax | <input type="text"/> |
|  | <input type="text"/> |  | <input type="text"/> |
| | |  | <input type="text"/> |

I am applying for Membership as an: Auctioneer Appraiser Agent Property Manager
(please tick appropriate box)

I have had experience, details are: _____

Please provide the names of two Practicing, Master, Fellow or Life Members of the Society of Auctioneers & Appraisers (SA) Inc. who are prepared to act as Referees:

Name Name

If admitted, I agree to be bound by the Constitution and Rules of the Society and to abide by Best Practice Procedures and any decisions therefrom. (Displayed on the website Auctioneers.com.au see MEMBER INFORMATION – Become a Member)

Signed Date

Auctioneer & Appraiser Categories

I hereby certify that I am a Practicing Auctioneer, Appraiser, Agent or Property Manager principally involved in these fields: *Please mark the fields that you are competent in and practice in on a regular basis.*

Auctioneers

Agricultural Machinery & Equipment
 Aircraft
 Antiques
 Blood Stock
 Boats
 Caravans
 Catering Equipment
 Charity Auctions
 Coins
 Computers & Electronics
 Crops
 Dolls, Teddy Bears & Toys
 Earthmoving Machinery & Equipment
 Fine Art
 Household Furniture, Goods & Chattels
 Jewellery
 Licensed Premises
 Liquor Stocks
 Livestock
 Machinery
 Mining Equipment
 Motor Vehicles
 Motor Vehicles—Damaged
 Musical Instruments
 Oriental Art
 Plant and Equipment
 Real Estate – Licensed Auctioneer
 Real Estate—Residential
 Real Estate –Rural
 Real Estate – Commercial & Industrial
 Stamps
 Stock
 Transport Industry
 Wineries & vineyards
 Wine
 Wool
 Other *(please specify)*

Appraisers

Agricultural Machinery & Equipment
 Aircraft
 Antiques
 Blood Stock
 Boats
 Caravans
 Catering Equipment
 Coins
 Computers & Electronics
 Crops
 Dolls, Teddy Bears & Toys
 Earthmoving Machinery & Equipment
 Fine Art
 Household Furniture, Goods & Chattels
 Jewellery
 Licensed Premises
 Liquor
 Stocks
 Livestock
 Machinery
 Mining Equipment
 Motor Vehicles
 Motor Vehicles—Damaged
 Musical Instruments
 Oriental Art
 Plant and Equipment
 Real Estate – Buyer's Agent
 Real Estate – Property Management
 Real Estate—Residential
 Real Estate –Rural
 Real Estate – Commercial & Industrial
 Stamps
 Stock
 Transport Industry
 Wineries & vineyards
 Wine
 Wool
 Other *(please specify)*

PROFESSIONAL INDEMNITY INSURANCE:

I hereby certify that my Professional Indemnity Insurance adequately covers my practice as an Auctioneer and/or Appraiser and that I will keep this policy current for the term of my Society of Auctioneers & Appraisers SA Inc. Membership. As a practicing Member I hereby certify that I will fully comply with all the requirements of the Society of Auctioneers & Appraisers SA Inc. at all times.

Signed

For **GENERAL AUCTIONEER** please supply details of your Dedicated Bank Account:

Name of Account Account No.

Bank Branch

I hereby certify that the Account is operated fully within the guidelines laid down by the Society of Auctioneers & Appraisers SA Inc.

Signed

| | | |
|-----------------|----------|--------------------------------------|
| Joining Fees | \$99.00 | <input type="text" value="\$99.00"/> |
| Membership Fees | \$295.00 | <input type="text" value="\$"/> |
| TOTAL | | <input type="text" value="\$"/> |

All prices include GST

Credit Card Authority for Expenses: TAX INVOICE: ABN: 82 885 149 245

Credit Card Type *(please tick)*:

Visa Amex Mastercard

Card No. _____

Amount: \$ _____

Expiry Date ____ / ____ CVV ____

Cardholder's Name _____

Signature _____

OR Pay by cheque (enclosed) OR Direct debit: BSB 105 011 Account 106 198 240

Please post cheque to: Society of Auctioneers & Appraisers (SA) Inc, 22 Greenhill Road, Wayville SA 5034
 or fax to: (08) 8372 7830