



PLUMBING PRODUCTS INDUSTRY

APPLICATION FOR MEMBERSHIP

Company Name: _____

Address: _____

Postal Address: _____

Tel: _____

Fax: _____

applies for membership and undertakes to comply with the rules of Plumbing Products Industry Group.

Number of Employees: _____

Major Activity: _____

Chief Executive: _____

Name: _____

Title: _____

Email: _____

PPI Group Representative: _____

Name: _____

Title: _____

Email: _____

Alternative Representative: _____

Name: _____

Title: _____

Email: _____

Signed for Applicant Company _____

Name: _____

2 x 6 monthly 1 x Annual

Invoice Period

Title: _____

Plumbing Products Industry Group

ABN 76 641 998 784

PO Box 6825, St Kilda Rd Central, Vic, 8008 + Suite 3, Level 5, 14 Queens Rd, Melbourne Vic 3004

Tel: +61 3 9865 8605 + Fax: +61 3 9865 8615 + Email: info@ppigroup.com.au + Website: www.ppigroup.com.au



PLUMBING PRODUCTS INDUSTRY

SIG Nomination Form

Company Name

nominates as our representative in the Special Interest Group/s below:

Taps/Valves>Showers

Nominee: _____

Email: _____

Sanitary Ware

Nominee: _____

Email: _____

Heated Water

Nominee: _____

Email: _____

Pipes Valves & Fittings

Nominee: _____

Email: _____

Signed: _____

Date: _____

Notes: Members may nominate to participate in one or more Special Interest Groups
Special Interest Groups will meet as determined by the Chair and as required

Please return this form to ensure we are aware of your company's interests

Plumbing Products Industry Group

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