



AbSec Nomination Form

This form is used to nominate an organisation or person to become a Category A or Category B member of AbSec.

1. Please enter the details of the person who is completing this form		
Name:		
Email Address:		
Phone Number:		
Member Category type:	<input type="checkbox"/> Organisation (Category A)	<input type="checkbox"/> Individual (Category B)

2. Please enter the details of the person or organisation you are nominating		
Nominee Name:		
Nominee Email Address:		
Nominee Phone Number:		
Organisation Name: (for Category A members only)		
Nominee Member Category type:	<input type="checkbox"/> Organisation (Category A)	<input type="checkbox"/> Individual (Category B)
How do you know the Nominee?		
How do you believe the Nominee meets the eligibility criteria Of AbSec?		

3. Signature of person completing this form	
Signature:	
Date:	

Should you need any assistance or more information regarding this form, please call AbSec on (02) 9559 5299 or Email the Memberships Team at: memberships@absec.org.au

Please return completed form to

21 Carrington Road Marrickville NSW 2204 or Email: memberships@absec.org.au