

# MEMBERSHIP APPLICATION

Master Locksmiths Association of Australasia Ltd.



We are pleased that you are considering becoming a Member of the MLAA. **Please note that processing your application will take approximately 2-4 weeks.** More information can be found in the [Membership Booklet](#) and at <https://mlaa.org.au/>.

## Checklist - have you attached the following documents?

- Business Name Registration and ABN
- Trade Certificate or RPL Certificate
- Business and Individual Security Licence
- Police Check if you haven't got a Security Licence
- Motor Vehicle Repair Licence (if applicable)
- SCEC indorsed Certificate/Card (if applicable)
- Certificate of Currency (Insurance)
- Qld Audit Compliance Certificate (if applicable)
- Other

Please send your Membership Application together with all supporting documents to:

[national@masterlocksmiths.com.au](mailto:national@masterlocksmiths.com.au)



**MASTER  
LOCKSMITHS**  
ASSOCIATION OF AUSTRALASIA

# Membership Application Form



## MEMBERSHIP TYPE

 Business

 Individual

Have you been a Member of the MLAA previously, if so in what capacity? Please circle						
Business	Trade	Associate	Individual	Student	Membership No:	___ ___ ___ ___

## APPLICANT DETAILS

Applicant Name:		
Business Name Holder:		
Business Name:		
ABN:	<input type="checkbox"/> Tick if you are a Sole Trader	
Street Address:		
Suburb:	State:	Postcode:
Postal Address:		
Preferred Mailing Address: (please ✓)	<input type="checkbox"/> Street Address	<input type="checkbox"/> Postal Address
Business Phone:	Mobile:	
Email Address:	Fax:	
Company Website:		

## BUSINESS DETAILS (please ✓)

<input type="checkbox"/> Shop only	<input type="checkbox"/> Mobile Van Only	<input type="checkbox"/> Shop and Van	No. of Vans:
Number of Staff:	Tradespersons:	Apprentices:	Other:
Number of years your company has been in business:			
Do you operate in other states or countries: (please ✓)		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> NZ	<input type="checkbox"/> NT	<input type="checkbox"/> WA	<input type="checkbox"/> SA
<input type="checkbox"/> TAS	<input type="checkbox"/> VIC	<input type="checkbox"/> ACT	<input type="checkbox"/> NSW
<input type="checkbox"/> QLD			
If you have additional locations, please complete the attached form			

## SERVICES PROVIDED (please ✓)

<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Automotive
<input type="checkbox"/> Safes/ Opening, sales & maintenance	<input type="checkbox"/> Master Locksmith Access Key (MLAK)	<input type="checkbox"/> Electronic Security
<input type="checkbox"/> CCTV	<input type="checkbox"/> Restricted Key Systems	<input type="checkbox"/> SCEC Indorsed
Members may be contacted by third parties about products and services that have been approved by the Board. If you <b>do not</b> wish to be contacted please tick the box.		

# Membership Application Form



## SECURITY LICENCES / REGISTRATION Please list all your details and attach copies

Licence/Registration Name	Licence/Registration/Card No.	State/Territory	Expiry Date
Motor Vehicle Repair			
SCEC			

Have you, your organisation, partner or director in your organisation ever had a security licence revoked or been convicted of a criminal offense?  Yes or  No If yes, please provide a written explanation

A Police Check is required to be attached if you do not have a Security Licence

## QLD SECURITY FIRM LICENCE AUDIT

If you have a Security Firm Licence (Qld) you are required to complete a Security Firm Licence Audit once every 3 years. If your business has been in operation for over 3 years you need to provide your last audit details.

Please attach a copy of your Compliance Certificate

Company that completed your Audit	
Date Audit was completed	

## TRADE QUALIFICATIONS

Have you, or a nominated employee already completed the MLAA Trade Competency Tests or an approved locksmithing course or trade apprenticeship? If yes, please attach copies of supporting documentation.

<input type="checkbox"/> MLAA Trade Test	<input type="checkbox"/> RPL Certificate
<input type="checkbox"/> Cert III Locksmithing (AUS)	<input type="checkbox"/> Cert IV Locksmithing (NZ)

## SUPPORT FOR APPLICATION (Business Applicants only)

Application for Business Membership must be supported by two current Business Members for a reference.

<b>1<sup>ST</sup> Referee</b>	
Name:	
Business Name:	
Contact Phone Number:	
Email:	

# Membership Application Form



<b>2nd Referee</b>	
Name:	
Business Name:	
Contact Phone Number:	
Email:	

## MEMBERSHIP FEE STRUCTURE

Membership Category	Applications Received July – December	Applications Received January - June
Business – Australia	<input type="checkbox"/> 598.00	<input type="checkbox"/> 299.00
Business – New Zealand	<input type="checkbox"/> 543.00	<input type="checkbox"/> 271.50
Individual - Australia	<input type="checkbox"/> 57.00	<input type="checkbox"/> 28.50
Individual – New Zealand	<input type="checkbox"/> 52.00	<input type="checkbox"/> 26.00
Additional Location - Australia	<input type="checkbox"/> 114.00	<input type="checkbox"/> 57.00
Additional Location – New Zealand	<input type="checkbox"/> 104.00	<input type="checkbox"/> 52.00

New Zealand Fees are shown in \$NZD and have no GST. Australian Fees are shown in \$AUD and include GST

## TAX INVOICE/RECEIPT

I authorise payment of \$		
Cardholder Name		
Card Number	Visa	Master Card
Expiry Date	/	CSV

Please note, payment will be processed **after** you have been notified of your successful application for membership.

Dated.....

Signature

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# Membership Application Form



## Registration Form for Additional Locations

Please complete this form to attach an Additional Location to your existing Business. If you have more than one additional location, please complete a separate form for each location.

Member Name:	
Member No.	
Business Name of Location*:	
Contact Person:	
ABN:	
Street Address:	
Business Phone:	
Mobile Phone:	
Email:	
Website:	
Postal Address (If different to Street Address)	
Office Notes:	

\* If Business Name is different from existing Business, please provide the Extract from ASIC detailing Business Name registration & ABN.

## Signature

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