

# Workforce Member Renewal 2024-25



Please take a moment to check the details we have on file for you and advise us of any changes.

<b>Name</b>			
<b>Postal Address</b>			
<b>Business Phone</b>		<b>Direct Line</b>	
<b>Mobile</b>		<b>Position</b>	
<b>Email</b>			
<b>Company Currently Employed with (if applicable)</b>			
<b>How many years in industry?</b>			
<b>2024-25 Annual Membership Fee (inc GST)</b>	<b>\$69</b>		
<b>Signature:</b>	_____	<b>Date:</b>	_____

A Tax Invoice will be sent out to you once this form has been returned to CMPA.

You can return the completed form via email to [enquiries@cmpavic.asn.au](mailto:enquiries@cmpavic.asn.au) or to PO Box 396, Kilmore, Vic 3764.