

# FAVIA

## *Fiji Audio Visual Industry Association*

GPO Box 16353, Suva

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## MEMBERSHIP APPLICATION FORM

Name: \_\_\_\_\_

T.I.N: \_\_\_\_\_

Business Name: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

### Contact

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

### Membership Type and Payment (Per year)

Standard \_\_\_ \$562.50 VIP

Associate \_\_\_ \$281.25 VIP

Corporate \_\_\_ \$1125 VIP

Individual \_\_\_ \$112.50 VIP

Please find enclosed my cheque payment of \$\_\_\_\_\_ being membership subscription and agreement to abide by FAVIA regulations.

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Please return the completed form and payment made out to FAVIA to:

The Secretary

FAVIA

c/o IMDVD

GPO Box 16353, Suva