



## ASSOCIATE APPLICATION FORM

*(This application is suitable for a single person or a couple)*

### Applicant Information

Full Name:		Date of Birth:
Residential Address:		
Postal Address:		
Home Phone:	Mobile:	Marital Status: Single/Widowed/Married
Email Address:		
How did you hear about MMM?		

### Spouse Information

*(If your spouse also wishes to apply, please give the following information)*

Full Name:		Date of Birth:
Mobile:	Email Address:	

### Church Affiliation

Name of Church you attend regularly:
Church Street Address:
Church Postal Address:

### Area of Service

Please indicate your primary area of service:

	Applicant	Spouse
Projects	<input type="checkbox"/>	<input type="checkbox"/>
Prayer	<input type="checkbox"/>	<input type="checkbox"/>
Administration	<input type="checkbox"/>	<input type="checkbox"/>
Fundraising	<input type="checkbox"/>	<input type="checkbox"/>
Ambassador	<input type="checkbox"/>	<input type="checkbox"/>

# MMM Associates

a world of opportunities



On completion of the application process you will be supplied with an Associate Welcome Pack which will contain a name badge, polo shirt, branded cap and a copy of the Associate Handbook, for each applicant, and you will be added to the distribution list to receive regular issues of TeamNews and PrayerForce.

There is an Associates establishment fee of \$45 for a single applicant and \$75 for a couple, which covers all on-board costs for new associates.

In subsequent years a voluntary contribution is suggested for Associates to ensure the Associates Programme is cost neutral to the organisation. The recommended contribution will match the initial registration amounts.

An invoice for the registration payment will be issued if your application is successful.

**Please indicate:**

1. Your preferred name on the badge:	Applicant
	Spouse
1. Your shirt size:	Male S M L XL 2XL 3XL 5XL
	Female 8 10 12 14 16 18 20 22 24

**SIGNATURES**

I/We wish to apply to be MMM Associate(s) and understand the requirements of the role.

Signed	Applicant	Date
	Spouse	Date

Please send this Application Form to your nearest Regional Centre Manager at one of the following addresses.

New South Wales	70 Wye Road, Wye NSW 2259	PH. 02 4357 2921
Queensland/NT	29, Lamington Road, Mango Hill, QLD 4509	PH. 07 3204 2503
Victoria/South Aust.	Unit 5/621 Whitehorse Road, Mitcham, VIC 3132	PH. 03 9837 2700
Tasmania	40 Edward Street, Perth, TAS 7300	PH. 03 6425 1629
Western Australia	33 Furley Road, Southern River, WA 6110	PH. 08 9456 0022

OFFICE USE ONLY	Date	Initials	Comments
Application Received	.../.../...	.....	_____
Approved by Regional Committee	.../.../...	.....	_____
Ratified by Management	.../.../...	.....	_____
National Associates Coordinator	.../.../...	.....	_____
Associates Register	.../.../...	.....	_____