

DJ Alliance Australasia Inc. Accredited Membership Application Form (AU)

Mobile DJ / DJ MC Club DJ

Master of Ceremony

1. Applicant Details	This section to be completed by ALL Applicants		
Full Name:	Date of Birth:		
Trading Name:	ABN:		
Residential or Postal Address:			
Suburb:	Postcode:		
State/Territory:	Country: AUSTRALIA		
Phone:	Mobile:		
E-mail:	Website:		
Business Page:	Business Page:		
Register of Members Privacy: Please tick if you wish details, of	ther than your name, not be made available for inspection [as per Constitution Section 8 (5)]		
2. Industry Experience	This section to be completed by ALL Applicants		
Duration: Location:			
What type of events do you usually entertain?	(Weddings, Private Parties, Clubs, Pubs, School Discos, Corporate, etc.)		
Do you specialise in any particular type of even	t? Yes / No		
If yes, what sort?			
Are you a sole trader? Yes / No	Are you a multi-operator business? Yes / No		
If not sole trader or multi-operator, employed I	ру:		
3. Mobile DJ Mobile DJ-MC Membersh	ip (Mobile DJ/MC)		
Industry Related References	This section is for Mobile DJ/MC Applicants ONLY		
Note: To enable your application review to be completed in a timelier ba	· · · · · · · · · · · · · · · · · · ·		
Company Name:			
Contact Name:	Phone: Mobile:		
E	-mail:		
Company Name:			
Contact Name:	Phone: Mobile:		
E	ail:		
Company Name:			
	Phone: Mobile:		
E	il:		
Client References Note: To enable your application review to be completed in a timelier ba	This section is for Mobile DJ/MC Applicants ONLY asis, wherever possible, please provide Phone, Mobile & Email details		
Client Name: F	Phone: Mobile:		
n			
E	-mail:		
_	-mail: Event Date:		

Category of Membership:

Client Name:		Phone:		Mobile:	
		E-mail:			
Type of Event:		Event Date:			
Did you MC this Event?	Yes / No				
Client Name:		Pho	ne:	Mobile:	
		E-m	E-mail:		
Type of Event:		Eve	ent Date:		
Did you MC this Event?	his Event? Yes / No				
Client Name:		Pho		Mobile:	
		E-m	E-mail:		
Type of Event:		Event Date:			
Did you MC this Event?	Yes / No				
		ı			
Client Name:		Pho		Mobile:	
			E-mail:		
Type of Event:		Eve	nt Date:		
Did you MC this Event?	Yes / No				
Mobile DJ/MC Documentati	on Checklist		This section is for Mobile DJ/	MC Applicants ONLY	
Application Form Completed			Yes / No		
If applicable, Copy of relevant Current Music Licencing		1	Yes / No		
Copy of Current Public Liability Insurance Certificate			Yes / No		
Copy of Current Test & Tag Certification			Yes / No		
Copy of Booking Form / Contract			Yes / No		
Photo / Video Evidence of Equipment			Yes / No		
Head Shot Photograph			Yes / No		
Bio and details for Website Listing Provided			Yes / No		
4. Club DJ Membership					
Industry Related References This section is for Club DJ Applicants ONLY					
Note: To enable your application review to be completed in a timelier basis, wherever possible, please provide Phone, Mobile & Email details					
Company Name:					
Contact Name:			Mobile:		
		E-m	ail:		

Copy of Booking Form / Contract	Yes / No
Head Shot Photograph	Yes / No
Bio and details for Website Listing Provided	Yes / No

5. Master of Ceremony Membership (MC)				
Industry Related References This section is for Master of Ceremony Applicants ONLY Note: To enable your application review to be completed in a timelier basis, wherever possible, please provide Phone, Mobile & Email details				
Company Name:				
Contact Name:	Phor	ne:	Mobile:	
	E-ma	ail:		
Company Name:				
Contact Name:	Phor	ne:	Mobile:	
	E-ma	ail:		
Company Name:				
Contact Name:	Phor	ne:	Mobile:	
	E-ma	ail:		
Client References			of Ceremony Applicants ONLY	
Note: To enable your application review to be completed in a timelier	T			
Client Name:	Phor		Mobile:	
	E-mail:			
Type of Event:	Eve	nt Date:		
	Γ		l	
Client Name:	Phor		Mobile:	
		E-mail:		
Type of Event:	Event Date:			
	Dha		Backile.	
Client Name:		Phone: Mobile:		
T CF	E-mail:			
Type of Event:	Event Date:			
Client Name:		ne:	Mobile:	
			Mobile:	
Two of French		E-mail:		
Type of Event:	Event Date:			
Client Name: Phone: Mobile:				
Client Name: Pho			Wiobile.	
Time of French				
Type of Event:	Event Date:			
Master of Ceremony Documentation Checklist This section is for Master of Ceremony Applicants ONLY				
Application Form Completed		Yes / No		
Copy of Current Public Liability Insurance Certificate		Yes / No		

Copy of Booking Form / Contract	Yes / No
Head Shot Photograph	Yes / No
Bio and details for Website Listing Provided	Yes / No

6. Additional Information	This section to be completed by ALL Applicants
What do you hope to gain from becoming a member of	of the DJAA?
Any other information / comments?	
The above information is true and correct to the best of my know	
(ii) the Code of Ethics, (iii) any Guidelines set by DJ Alliance Austrapplicable, provide any evidence to establish continuing complian	
way, I understand that my Accredited membership may be revok	
Member and forfeit any fees that have been paid to DJ Alliance A	
take time to process.	
Signature:	Date:
Full Name	
Full Name:	
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