

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

Category of Membership: (Accredited Level Applicants Only) <input type="checkbox"/> Mobile DJ / DJ MC <input type="checkbox"/> Club DJ <input type="checkbox"/> Master of Ceremony	
1. Applicant Details This section to be completed by ALL Applicants	
Full Name:	Date of Birth:
Trading Name:	NZBN:
Residential or Postal Address:	
Suburb:	Postcode:
Region/Province:	Country: NEW ZEALAND
Phone:	Mobile:
E-mail:	Website:
Business Page:	Business Page:
Register of Members Privacy: <input type="checkbox"/> Please tick if you wish details, other 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 event?	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 by:	

3. Mobile DJ Mobile DJ-MC Membership (Mobile DJ/MC)		
Industry Related References		This section is for Mobile DJ/MC Applicants ONLY
<small>Note: To enable your application review to be completed in a timelier basis, wherever possible, please provide Phone, Mobile & Email details</small>		
Company Name:		
Contact Name:	Phone:	Mobile:
	E-mail:	
Company Name:		
Contact Name:	Phone:	Mobile:
	E-mail:	
Company Name:		
Contact Name:	Phone:	Mobile:
	E-mail:	
Client References		This section is for Mobile DJ/MC Applicants ONLY
<small>Note: To enable your application review to be completed in a timelier basis, wherever possible, please provide Phone, Mobile & Email details</small>		
Client Name:	Phone:	Mobile:
	E-mail:	
Type of Event:	Event Date:	
Did you MC this Event?	Yes / No	

Client Name:		Phone:	Mobile:
		E-mail:	
Type of Event:		Event Date:	
Did you MC this Event?	Yes / No		
Client Name:		Phone:	Mobile:
		E-mail:	
Type of Event:		Event Date:	
Did you MC this Event?	Yes / No		
Client Name:		Phone:	Mobile:
		E-mail:	
Type of Event:		Event Date:	
Did you MC this Event?	Yes / No		
Client Name:		Phone:	Mobile:
		E-mail:	
Type of Event:		Event Date:	
Did you MC this Event?	Yes / No		
Client Name:		Phone:	Mobile:
		E-mail:	
Type of Event:		Event Date:	
Did you MC this Event?	Yes / No		
Mobile DJ/MC Documentation Checklist		This section is for Mobile DJ/MC Applicants ONLY	
Application Form Completed	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	
<i>Note: To enable your application review to be completed in a timelier basis, wherever possible, please provide Phone, Mobile & Email details</i>			
Company Name:			
Contact Name:		Phone:	Mobile:
		E-mail:	
Company Name:			
Contact Name:		Phone:	Mobile:
		E-mail:	
Club DJ Documentation Checklist		This section is for Club DJ 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

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:	Phone:	Mobile:
	E-mail:	

Company Name:

Contact Name:	Phone:	Mobile:
	E-mail:	

Company Name:

Contact Name:	Phone:	Mobile:
	E-mail:	

Client 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

Client Name:	Phone:	Mobile:
	E-mail:	

Type of Event:	Event Date:
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Client Name:	Phone:	Mobile:
	E-mail:	

Type of Event:	Event Date:
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Client Name:	Phone:	Mobile:
	E-mail:	

Type of Event:	Event Date:
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Client Name:	Phone:	Mobile:
	E-mail:	

Type of Event:	Event Date:
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Client Name:	Phone:	Mobile:
	E-mail:	

Type of Event:	Event Date:
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Master of Ceremony Documentation Checklist

This section is for **Master of Ceremony Applicants ONLY**

Application Form Completed	Yes / No
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Copy of Current Public Liability Insurance Certificate	Yes / No
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Copy of Booking Form / Contract	Yes / No
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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
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What do you hope to gain from becoming a member of the DJAA?

Any other information / comments?

The above information is true and correct to the best of my knowledge. I agree to comply with (i) the Code of Conduct, (ii) the Code of Ethics, (iii) any Guidelines set by DJ Alliance Australasia Inc, on an on-going basis, and will (iv) if applicable, provide any evidence to establish continuing compliance as required. If these conditions are not met in any way, I understand that my Accredited membership may be revoked or my membership level downgraded to a General Member and forfeit any fees that have been paid to DJ Alliance Australasia Inc. I understand that this application may take time to process.

Signature: Date:

Full Name: