



ACCREDITATION APPLICATION

FIRST NAME SURNAME

COMPANY (if student, institution)

TRADING AS POSITION HELD

STREET SUBURB / TOWN

STATE POSTCODE

PHONE (B/H) PHONE (A/H)

MOBILE PHONE FAX

E-MAIL WEBSITE

YEARS IN BUSINESS Assoc/Membership No:

PLEASE TICK

- Member Accreditation \$220.00inc GST Application Fee
- Advanced Accreditation \$440.00inc GST Application Fee
- Master Accreditation \$880.00inc GST Application Fee

CATEGORY OF ACCREDITATION

- Corporate Special Event

TITLE / DESCRIPTION OF SUBMITTED PROGRAM(S)

.....

Approx. Running Time Year program was completed

Name of Client Phone Number

Acquisition Format Edited Master Format



KEY PERSONNEL INVOLVED IN THIS PRODUCTION

Camera Person(s)
Producer Script Writer
Director Editor
Field Audio Studio Audio
Lighting Vision Switcher

STOCK FOOTAGE

Used Not Used

If stock footage was used, roughly what percentage of the final program contained stock footage?

Stock Footage Source(s)

What was the client brief?
.....

(please tick) If I am a successful applicant, I give permission to the AVPA or their appointed officers to include my name and / or business name in the "Accredited Members" register on the official AVPA website which will be accessible by members of the public and display my accreditation status.

I have read and understand the "Australian Video Producers Association Inc. Minimum Professional Standards" and I believe my work meets these requirements. I submit this program for appraisal (as a typical sample of my work and ability) so that I may be considered for AVPA accreditation.

I understand that unless I am an accredited financial member of the AVPA, I cannot use the AVPA name or Logos in any of my form of stationary or advertising, either print, electronic or verbal. Accreditation certificates remain the property of the AVPA and must be returned at the request of the AVPA, or if I fail to renew my membership.

Extracts of this DVD(s) may be used by the AVPA in official training sessions (anonymity will be preserved).

I agree to abide by these requirements.

Signed Date



ACCREDITATION APPLICATION PAYMENT METHODS

Name

Please post your DVD(s) for assessment along with payment. Each "Accreditation Application" requires a separate application form but only one "Accreditation Application Payment Methods" Form.

- Cheque or Money Order made out to AVPA Inc. and posted with these forms.
- Direct Deposit (this form must be returned to verify payment). Please make out to:

AVPA Inc.
National Australia Bank
BSB: 083019
Account: 038552222

When paying please make sure that you identify the payment by placing your **name and **Identification number** in the sender details.*