VICTORIAN SECURITY INSTITUTE

# MEMBERSHIP APPLICATION FORM

**Please print out and complete the Application Form (in full) and send back in hard copy to the VSI Secretariat, Level 1, 242 Hawthorn Road, Caulfield VIC 3161 at your earliest convenience. A further electronic copy may be scanned and sent through to the email info@vsi.org.au**

## Section 1 – Applicant Details

Title: ☐ **Mr** ☐ **Mrs** ☐ **Miss** ☐ **Ms** ☐ **Other**_____

Full Name OR Name of Corporation:

Preferred First Name: Date of Birth: / /

Home Address:

Suburb: State: Postcode:

Business Name:

Business Address:

Suburb: State: Postcode:

Telephone (Home): (Business): (Fax):

(Mobile): (Email):

Preferred address for the service of notices (Please Tick One): ☐ **Home** ☐ **Business**

Are you applying for ☐ **Individual** OR ☐ **Corporate** membership

*(Proceed to Section 2)*

## Section 2 – Position details & nature of Business

Position Title: Are you self-employed? ☐ Yes ☐ No

**Nature of Business Activity** *(Tick any or all of the following boxes):*

| | |
|---|---|
| Protective Security (Manpower)<br>☐ Security Guards<br>☐ Mobile Patrols / Alarm Responses<br>☐ Crowd Control ☐ Loss Prevention<br>☐ Executive Protection (Bodyguards) | ☐ Electronic Security |
| ☐ Cyber Security | ☐ Locksmith/ Access Control Systems |
| ☐ Security Risk Management or Consulting | ☐ Security Fencing, Gates, Doors, Barriers |
| ☐ Risk Management / Consultancy Services | ☐ Operational Management |
| ☐ Education & Training Services | ☐ Other (Please specify) |

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## Section 3 – (Indicate particular area of Interest)

☐ Crowd Control

☐ Protective Security (Guards & Patrols)

☐ Electronic Security (Including Central Stations)

☐ Corporate Governance

☐ Finance and Administration

☐ Media & Public Relations

☐ Risk Management & Consulting

☐ Education & Professional Development

☐ Do you wish to participate in any Sub Committees?

## Section 4 – Educational Details (Applicable only if membership sought as part of licensing or registration process)

Education Level Achieved: ☐ Secondary ☐ Graduate ☐ Postgraduate ☐ Other

Name of Course (Please attach a copy of award): Year Completed:

Name of Institution:

## Section 5 – Security Industry Experience (Applicable only if membership sought as part of licensing or registration process)

| Position | Company | Start date | End Date |
|---|---|---|---|
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## Section 6 – Referees & Proposer

**Please provide two referees. (Referees do not have to be VSI members.)**

**Referee** (1)

Full Name: _____

Contact Address: _____

_____

Telephone (W): _____ Telephone (M): _____

Email: _____

**Referee** (2)

Full Name: _____

Contact Address: _____

_____

Telephone (W): _____ Telephone (M): _____

Email: _____

**This form must be signed by a proposer and a seconder who are financial members of the VSI.**

Proposer Name: _____ Signature: _____

Seconder Name: _____ Signature: _____

## Section 7 – Past Offences

Have you ever been charged with any criminal or civil offence in Australia or any other country?

Yes ____ No ____

If the answer is yes, please give full details as to the jurisdiction/charge/result of action including penalties imposed.

| |
|---|
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## Application Checklist

**1. All Members:**

□ National Name check
□ Referees (1x Professional; 1x Personnel)
□ Certified Copy of photo ID (Driver's Licence, Passport etc.)
□ Detailed CV
□ Educational Qualification

**2. Members applying for membership as part of licensing or registration process:**

□ Business Registration Certificates, including Company Name, Business Name, ACN, ABN, etc.
□ Public Liability Insurance Certificate (minimum cover $10 million).
□ Workers Compensation Insurance Coverage (applicable where you have employees)
□ Notice of compliance with superannuation.
□ Company Profile

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Applicants awarded membership to the Victorian Security Institute for the purpose of Licensing will be required to complete and provide evidence of continuous Professional development (CPD).
Examples of CPD include:

- Formal Education and Short courses
- Learning activities
- Conferences
- Presentation of papers
- Industry Involvement
- Services to the Security profession

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**NOTE: Please attach supporting documentation with this Application.**

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**Declaration:**

I/We declare that all information supplied in this application for membership of the Victorian Security Institute Inc. is true and correct in every detail.

I/We agree to give the Victorian Security Institute the full authority for the conduct of any enquiries concerning such information and any other enquiries concerning the character and background of the applicant which the Institute may wish to make.

I/We agree to accept without explanation, the decision of the Institute concerning this application.

I/We agree that I/We will be liable for any and all costs arising from the investigation of any Official Complaint; or process of determination of suitability to hold/retain membership of the Institute.

If accepted as a Member I agree to abide by the Rules and **"Code of Ethics"** of the Institute at all times which are:

- The integrity and reliability of members must be beyond reproach because of the confidentiality and responsible nature of the profession.
- If called upon to give evidence or to speak on a matter of fact in the practice of the profession a member shall report what he knows or believes to be the truth.
- A member shall neither maliciously, negligently, nor improperly injure directly or indirectly the reputation, prospects, or business of another member of the profession.
- Members shall at all times conduct themselves in a manner which shall not without proper justification prejudice in any way the interests or reputation of the Institute and its members.
- A member shall not accept instructions or business in connection with the profession of security consultant on the basis that no charge will be made unless a successful result is achieved.
- The relationship between a member and his principal shall at all times be fiduciary, and a member shall not disclose information confided in him in course of his practice by his principal without the consent of the principal.
- A member shall not offer or receive any improper financial or other inducement to secure or accept instructions.
- The Institute shall be non-political and non-sectarian.

| Print full name | Signature of applicant |
|---|---|
| | |

| **If application for corporate membership**<br>Name of authorised person & position making the application on behalf of the Corporate Member: | Signature of applicant |
|---|---|
| | |

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# REGISTRATION & TAX INVOICE FOR VSI MEMBERSHIP 2017-18

Please complete the details below and send back in hard copy to the VSI Secretariat, Level 1, 242 Hawthorn Road, Caulfield, VIC 3161 at your earliest convenience. A further electronic copy may be scanned and sent through to the email info@vsi.org.au

**I am applying for VSI membership.**

Price* (all inc. GST): (duration of membership is for the calendar financial year ending 30th June)

| MEMBERSHIP CATEGORY | APPLICATION FEE | ANNUAL SUBSCRIPTION |
|---|---|---|
| **1. General - individual:** | $75.00 ☐ | $220.00 ☐ |
| **2. General - corporate:** | $110.00 ☐ | $880.00 ☐ |

By Cheque: The Membership Fee payable by Cheque addressed to the Victorian Security Institute Inc. is enclosed for the amount of $ _____

By Direct Bank Deposit:

**Bank:** Westpac **BSB:** 033-000 **Account no:** 366 951 **Amount:** $_____

A receipt for the direct deposit must be provided with application.

By Credit Card via PayPal http://www.vsi.org.au/member-services/membership-application-fees/

Corporate Membership application

| | |
|---|---|
| Name of delegate(s) & positions (up to 4 persons) | Company |
| Address | Telephone |
| Primary Email | |

Please note that a membership fee for the financial year will be charged upon approval of this application. (A pro-rata rate may apply). In the event that the application is rejected, the joining fee will not be refunded, however the membership fee will be refunded. This form becomes your Tax Invoice when you make payment. Please keep a copy for your GST records. Confirmation will be sent by e-mail.

**Privacy statement: The VSI is bound by the National Privacy Principles (NPPs) set out in the Privacy Amendment (Private Sector) Act 2000. The VSI will collect and store information you provide in this registration form for the purposes of enabling us to communicate with you. The VSI will not otherwise, without your consent, use or disclose your personal information for any purposes unless such purpose is permitted by law.**