Private Label Manufacturer Directory Application Form

for companies located in Australia and New Zealand

AUSTRALIA & NEW ZEALAND

PLMA INTERNATIONAL COUNCIL

ABN 27 720 583 468

We wish to apply for addition to the Private Label Manufacturer Directory.

Company name:

Head Office - Street address:

Suburb:

State: Postcode:

Telephone: ( ) Facsimile: ( )

Email:

Website:

Key contact:

Contact's position:

Description of private label categories and services offered:

☐ I confirm that I am a member of the PLMA.

Your application form will be processed within seven (7) days of receipt.

Please make cheques payable to PLMA Australia/New Zealand and mail with this completed form to:
PO Box 29, Millers Point NSW 2000

QUERIES? Please call +612 9252 4788 Fax +612 9252 4788 or Email: plmaaustnz@aol7.com.au

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