

MEMBERSHIP APPLICATION FORM

Details of Organisation Applying for Membership

Name of Organisation:	
Brief Description of Activities/Purpose of Organisation:	
Address of Organisation:	
Telephone No. of Organisation	Website of Organisation:
Is this a not-for-profit organisation?	
Number of employees (FTEs):	

Contact Person	
Title:	Position:
Last Name:	First Name:
Address (If different to above)	
Telephone:	Mobile:
E-mail:	

<input type="checkbox"/> Applying for General Membership	<input type="checkbox"/> Applying for Strategic Industry Partner Membership
<input type="checkbox"/> Applying for Personal Membership	<ul style="list-style-type: none"> <i>All membership categories are listed and explained in the Membership Policy document</i>

<input type="checkbox"/>	I confirm that the organisation nominated on this form would like to become a member of Food & Fibre Gippsland , and that I am authorised to make this application on the organisation's behalf. Please invoice me for the annual membership fee and levy.
<input type="checkbox"/>	I confirm that I have read the Charter and the Membership Policy of Food & Fibre Gippsland and agree with the content and principles. I further confirm that in becoming a member of Food & Fibre Gippsland, I, and the organisation I represent, will support the purpose and principles of Food & Fibre Gippsland.
<input type="checkbox"/>	I give permission to the Food & Fibre Gippsland to include reference to my organisation, including its web-site link, on the web-site of Food & Fibre Gippsland.
<input type="checkbox"/>	I acknowledge that I am eligible for nomination to a Food & Fibre Gippsland Board position, as per the Membership Policy (general and personal members only).
<input type="checkbox"/>	I acknowledge that I may become a member of the various working groups and sub-committees of Food & Fibre Gippsland

Signature:	Date:
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Please return by email to Jody O'Brien - jody.obrien@foodandfibregippsland.com.au

Office Use Only		
Membership Application Endorsed by:		
(Name of Food & Fibre Gippsland member)	Signature	date
Membership Application Accepted by:		
(Chairman)	Signature	date