|  |
| --- |
| I propose this entity for membership of GBGA Inc. in accordance with Clause 7 of the Model Rules.Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| I second the proposal of this entity for membership of GBGA Inc. in accordance with Clause 7 of the Model Rules.Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Name of entity applying for membership**Individual, corporation or partnership |  |
| **Nominated primary person to vote on behalf of membership.** One vote per membership |  |
| **1st Reserve person to vote on behalf on membership (Optional)**May only vote if nominated person is absent |  |
| **2nd Reserve person to vote on behalf on membership (Optional)**May only vote if nominated and 1st reserve person is absent |  |
| **Property address** |  |
|  |
| **Postal address**If different to Property address |  |
|  |
| **Email address**Most correspondence will be via email |  |
| **Phone** |  |
| With reference to Clause 5 of the Model Rules, which class of membership you are applying for? The annual fee for both membership classes is $250. Tick one box only. |
| **Grower Member** |  | **Associate Member** |  |

I declare the above information is true and correct.

I have received a copy of the model rules to consider before applying for membership.

I am aware the Association holds General and Products Liability Insurance to a limit of $30M.

I request the management committee consider my application for membership.

Signature of primary voting person on behalf of membership: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The Treasurer will issue a Tax Invoice to the applicant once the application is approved by the management committee. The membership is only valid when payment is received.**

Scan and email your completed application form to granitebeltgrowers@gmail.com