

# Regional Australia Party (QLD) Inc.



## Membership Application Form

Title: <input type="checkbox"/> Ms <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other _____		
Name:		(As appears on the electoral roll.)
Address:		(As appears on the electoral roll.)
City:	State: QLD	Post Code:
Date of birth:     /     /		
Phone:		Mobile:
Work E-mail:		
Personal E-mail:		
Membership fee:	<b>\$10.00</b>	Tick if paid: <input type="checkbox"/>
Bendigo Bank: Regional Australia Party (QLD) Inc. BSB: 633 000 Account No: 170 536 254 (For <b>transaction description</b> please refer to membership <b>first and last name</b> .)		
<b>Participation Level: (Please tick)</b>		
Passive: To be kept informed via email updates.		<input type="checkbox"/>
Active: With reasonable notification make time available to do various tasks.		<input type="checkbox"/>
Committed: Assist with recruiting members, serving on sub committees, fund raising and election campaigns.		<input type="checkbox"/>
<b>Applicant's declaration:</b>		
<input type="checkbox"/> I am a resident of Queensland.		
<input type="checkbox"/> I hereby apply to become a member of the Central & North Queensland Party.		
<input type="checkbox"/> I agree to abide by the terms of the C&NQ Party Constitution.		
<input type="checkbox"/> I consent to my membership details being given to the QEC to support the C&NQ Party registration and to being contacted by the QEC regarding my membership of this political party.		
<input type="checkbox"/> I declare that I am not a member of another political party.		
<input type="checkbox"/> I understand that membership of the Regional Australia Party (QLD) Inc. is on-going until I otherwise notify.		
<b>Applicant's Signature:</b>		Date:     /     / 20
Please send the completed form to The Secretary, Regional Australia Party (QLD) Inc. PO Box 94, Edge Hill, QLD 4870 or scan and email to <a href="mailto:secretary@regionals.org.au">secretary@regionals.org.au</a>		
Party secretary or authorised delegate has verified applicant's contact details: <input type="checkbox"/>		
<b>Approving executive committee members:</b>		
Name:		Name:
Signature:		Signature:

Regional Australia Party (QLD) Inc. ABN 18 614 597 342

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