Membership Application Form

Mount Morgan Agricultural Show Society Inc.

Annual Membership Fee: $5.00

APPLICANT DETAILS

FULL NAME: _____

RESIDENTIAL ADDRESS: _____

PHONE: _____ EMAIL: _____

I hereby apply to become a member of the Mount Morgan Agricultural Show Society.

APPLICANT SIGNATURE: _____ DATE: ____ / ____ / _____

PROPOSER

I, being a current financial member of the Mount Morgan Agricultural Show Society, propose the above applicant for membership.

NAME: _____

SIGNATURE: _____ DATE: ____ / ____ / _____

SECONDER

I, being a current financial member of the Mount Morgan Agricultural Show Society, second the above applicant for membership.

NAME: _____

SIGNATURE: _____ DATE: ____ / ____ / _____

Completed membership forms can be returned to:

The Management Committee, Mount Morgan Agricultural Show Society Inc.
PO Box 184, Mount Morgan QLD 4714
Email: mountmorganshow@gmail.com

BANK TRANSFER DETAILS

Account Name: Mt Morgan Show Society Inc. BSB: 064-710 Account: 10689930

Payment reference: Please use your full name when making payment.

Completed applications and the $5.00 annual fee may also be brought to the next General Meeting for processing.

COMMITTEE USE ONLY

Date Received: ____ / ____ / _____ General Meeting Date: ____ / ____ / _____

Payment Method: [ ] CASH [ ] EFT Receipt Number: _____

Authorised By: _____ Position: _____

Signature: _____