

Membership Application Form 2019

Membership is valid until **30 June 2020**

Contact details

Name	<input type="text"/>		
Postal address	<input type="text"/>		
Postcode	State	Phone	<input type="text"/>
Mobile	Email		<input type="text"/>

Membership

Membership is fully tax deductible

☐ **HortConnectWA full membership – \$65 per annum (including GST)**

Are you a grower? ☐ No ☐ Yes – if you are a grower, what do you grow? *(please tick)*

☐ Vegetables ☐ Potatoes ☐ Citrus ☐ Pome ☐ Other: *(please specify)*

Payment

☐ **Payments by credit card**

Please charge **\$65.00** to my ☐ Visa ☐ MasterCard *(please check one box)*

Name on card Card number

CVC Expiry /

I (full name) of above address authorise The West Australian Vegetable Growers Association Inc to debit funds from the financial institution account as details below to validate my membership to HortConnectWA.

By signing this credit card request I acknowledge the terms and conditions governing debit arrangements between myself, HortConnectWA and The West Australian Vegetable Growers Association Inc.

Signed: Date / /

☐ **Payments by direct credit**

HortConnectWA

BSB: 086-006

Account: 83-979-8943

Ref: Surname



Involvement in horticulture

Please explain your involvement in the agricultural sector:

- | | | | |
|---|------------------------------------|---|---|
| <input type="checkbox"/> Agribusiness | <input type="checkbox"/> Law | <input type="checkbox"/> Employed on a farm | <input type="checkbox"/> Farming organisation |
| <input type="checkbox"/> Machinery | <input type="checkbox"/> Transport | <input type="checkbox"/> Family connections | <input type="checkbox"/> No involvement |
| <input type="checkbox"/> Other (please specify): <input type="text"/> | | | |

How did you hear about HortConnectWA?

- | | | |
|---|---|--|
| <input type="checkbox"/> Social media | <input type="checkbox"/> Word of mouth | <input type="checkbox"/> Attended an HortConnectWA event |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Attended an industry event | <input type="checkbox"/> Print media (<i>Countryman, Farm Weekly, WA Grower</i>) |
| <input type="checkbox"/> Website | <input type="checkbox"/> Search engine | <input type="checkbox"/> Forum or blog |
| <input type="checkbox"/> University/studies | <input type="checkbox"/> Other (please specify): <input type="text"/> | |

Membership declaration and signature

I wish to become a member of the HortConnectWA and agree to abide by the organisation's code of conduct.

Signed:

Date

 / /

Send to: HortConnectWA

702-704 Murray St, West Perth, WA, 6005 or email office@hortconnectwa.com

Membership will commence on receipt of payment.

Privacy Act: The information you provide to HortConnectWA is used by HortConnectWA and The West Australian Vegetable Growers Association Inc. to administer your membership and in the provision of membership benefits. The information provided may be used to contact and advise you of other member services or products. You may elect to cease receiving such information at any time by contacting HortConnectWA by way of The West Australian Vegetable Growers Association Inc. through the methods below. Your personal information will not be disclosed without your consent for any other purpose unless required or authorised by law. You may request access to your personal information and request HortConnectWA update your records by contacting the Membership Coordinator in writing at vegetablesWA 702-704 Murray St, West Perth WA 6005 or email office@hortconnectwa.com.

