



**EXPORTERS' CLUB®**  
City of Onkaparinga

## Membership Application

### PRINCIPAL MEMBER

Mr Mrs Ms Miss (please Circle)  
Surname \_\_\_\_\_  
Given names \_\_\_\_\_  
Position \_\_\_\_\_  
Telephone/mobile \_\_\_\_\_  
Facsimile \_\_\_\_\_  
Email address \_\_\_\_\_  
Wwwweb address \_\_\_\_\_

### ORGANISATION

Name \_\_\_\_\_  
ABN \_\_\_\_\_

### POSTAL ADDRESS

Address/ PO Box \_\_\_\_\_  
City / Suburb \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_

### MEMBERS REPRESENTATIVE

Mr Mrs Ms Miss (Please Circle)  
Surname \_\_\_\_\_  
Given names \_\_\_\_\_  
Position \_\_\_\_\_

### LOCATION (if different)

Address \_\_\_\_\_  
City \_\_\_\_\_  
Postcode \_\_\_\_\_  
Country \_\_\_\_\_

### PAYMENT DETAILS

Please accept my application for membership of the Exporters Club Onkaparinga on behalf of the organisation named above.

The organisation and its employees agree to be bound by the rules of the Club.

**Signature of the Member or the Member's Representative:** \_\_\_\_\_

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

Annual membership fee for the Onkaparinga Club is: [ ] \$160 for businesses  
[ ] \$ 60 for full time students

Payment by: [ ] Cash [ ] Cheque [ ] Credit Card [ ] EFT (please tick)

Credit Card Payment by: [ ] Master Card [ ] Visa (please tick)

Cardholder's name \_\_\_\_\_ Cardholder's signature \_\_\_\_\_

Card Number \_\_\_\_\_ Card Expiry Date \_\_\_\_\_

Payment by electronic transfer can be made to Commonwealth Bank. Account Name: Exporters' Club No 2 Account, BSB: 065 112, Account Number 1009 5196

### MEMBER PROFILE

It would be useful for the club if you provide the following information:

Principal Activity of the Business e.g. Manufacturing or services etc \_\_\_\_\_

Current Export markets \_\_\_\_\_ Planned Export markets \_\_\_\_\_

Number of employees \_\_\_\_\_

How did you hear about the Exporters Club? \_\_\_\_\_