

MEMBERSHIP FORM 2016-2017				
APPLICANT INFORMATION				
Name of Organisation:				
Name of Primary Organisation (if second business):				
Postal Address:				
City:	State:	Post Code:		
Contact Person/Position Held:				
Phone:	Fax:			
E-mail:	Website:			

MEMBERSHIP OPTIONS			
FULL MEMBERSHIP			
Full Year 2016-2017	\$270		
This is the regular member	ship for operators who are <i>not</i> a member of one of our dual membership associations.		

CORPORATE MEMBERSHIP		
Full Year 2016-2017	\$499	
If you have multiple products or services, you are entitled for corporate membership, this enables you to list as many		
of your products as you like on the	Adventure Queensland Website	

DUAL MEMBERSHIP				
Full Year 2016-2017	\$160			
This is the reduced rate for operat you:	ors who are also members of other associatio	ns. Please indicate which applies to		
( ) Regional Backpacking Organis ( ) Local or Regional Tourism Org		_ (please specify which one) _ (please specify which one)		
( ) Other	(please specify which one)	_ ;		
Please contact us if you are unsure reduced rate.	e. Note you need to be a member for the 201	6-2017 financial year to qualify for this		

How to join Adventure Queensland:		
Complete the details on all pages	The email supplied will be the primary one used for all member communication including newsletters and meeting invitations.	
Send the completed forms to us	Email all pages to the Adventure Queensland Treasurer, Gabby Shaw info@adventurequeensland.com.au	
Make a payment	Payment can be either cheque or electronic transfer (details below) If you are making an electronic transfer you must include your trading name in the transaction or invoice number.  NB – Payment of your membership and form must be received prior to being part of Adventure Queensland.	

## Method of payment:

Direct Deposit or Cheque payment (please circle)

- A. Enclosed cheque for \$.....(please make cheques payable to QBITIA)
- **B.** Direct Deposit

Bank Westpac Bank Surfers Paradise Branch

Account Name QBITIA Inc

BSB 034-216 Account Number 313212

Mail or Fax forms to the Adventure Queensland treasurer, Gabby Shaw.

PO Box 5358, Airlie Beach QLD 4802 Phone: 0448 593 585

Fax: 07 4940 2020 Email: info@adventurequeensland.com.au

**Adventure Queensland** 

(Queensland Backpackers & Independent Travellers Association Inc.)

ABN: 78 198 402 904. Association Registered for GST

## **SIGNATURE**

By executing this membership form I hereby declare that I for the term of our membership I will;

- 1. Comply with all laws, by-laws and regulations imposed by any relevant authority having jurisdiction over the conduct of my/our business
- 2. Comply with the Constitution, by-laws and Code of Practice of this Association
- 3. Hold a current Public Liability Policy to a value of not less than \$10 million in relation to my/our business; and hereby acknowledge that compliance with the above is a condition of membership.
- 4. If requested I will provide to Adventure Queensland copies of any documents to verify the matters declared in clauses 1,2 & 3 above.

In signing this form the applicant agrees to be bound by the rules of Adventure Queensland.

(N.B Please be aware that this tax invoice acts as a receipt for membership payment, so please ensure that you retain a copy of this document.)

Signature of applicant:	Date:

**Backpacking Queensland is proudly supported by our sponsors,** Acumen Insurance. Our sponsors are able to offer Adventure Queensland members a great range of products and services to save you money and enhance your business which they may want to contact you about occasionally.

If you would not like to be contacted by our valued sponsors please indicate below:

[ ] No, I would not like to be contacted



