

GOLD COAST REGIONAL BEEKEEPERS INC.

"Furthering knowledge in Beekeeping by assisted learning and practical experience"

PO Box 319, Ashmore City Qld 4214

www.gcrb.org.au

President

John Polley

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Treasurer

Roslyn de Boer

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Renewal of Membership 2018/2019

July 1, 2018 - June 30, 2019

I/We hereby apply to renew membership to the Gold Coast Regional Beekeepers Inc.

Name of Member: _____ **M/s #:** _____

Beekeepers Registration No: (DAFF / DPI): _____ **Number of Hives:** _____

(Beekeepers must register with their appropriate state body i.e. Qld - DAF, NSW - DPI on acquisition of their first hive.)

Address: _____

_____ **Post Code:** _____

Email Address: _____@_____

Mobile: _____ **Landline:** _____

Family members: _____

Signature of Member: _____ **Date:** ____/____/____

(Parent for Junior application) (by signing I agree to follow the Rules/Constitution of GCRBI)

I give permission for my contact details to be available to other members: YES _____ NO _____

Signature: _____ **M/s #** _____

(Please tick one)

Membership Class: **Individual \$30** _____ **Family \$40** _____ **Junior \$15** _____

Direct Deposit details:

(Reference: please use your Surname)

Account Name: **GCRBI**
BSB: **124 065**
Account: **22805910**

Cash: \$ _____ **Cheque: \$** _____ **Direct Deposit: \$** _____ **Date Deposit / Paid** ____/____/____

Cheques: Please make payable to: **Gold Coast Regional Beekeepers Inc.**

Post or email this form to the Club Treasurer: Post details above or email: roslyn@rojotrading.com

For office use only

Receipt No: _____ Date paid: ____/____/____

Date of Committee Meeting: ____/____/____ Membership: Reg: _____ Waggle: _____

Membership Class Accepted: Founding: _____ Life: _____ Individual/F: _____ Junior: _____ Honorary: _____

Applicant advised of decision ____/____/____ Rct.Ack: _____ Membership No: _____