

# **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

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*Roslyn de Boer*  
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## ***Application for Membership 2018/2019***

*July 1, 2018 - June 30, 2019*

I hereby apply for membership of the Gold Coast Regional Beekeepers Inc.

**Name of Applicant:** \_\_\_\_\_

**Beekeepers Registration No: ( DAFF / DPI):** \_\_\_\_\_ **Number of Hives:** \_\_\_\_\_  
(Beekeepers must register with their appropriate state body i.e. Qld - DAFF, NSW - DPI on acquisition of their first hive.)

**Address:** \_\_\_\_\_  
\_\_\_\_\_ **Post Code:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_@\_\_\_\_\_

**Mobile:** \_\_\_\_\_ **Landline:** \_\_\_\_\_

**Family members:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **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 \_\_\_

**Nominated by:** \_\_\_\_\_ **Signature:** ..... **M/s #** \_\_\_\_\_

**Seconded by:** \_\_\_\_\_ **Signature:** ..... **M/s #** \_\_\_\_\_

(Please tick one)  
**Membership Class:**      **Individual \$50** \_\_\_\_\_      **Family \$75** \_\_\_\_\_      **Junior \$20** \_\_\_\_\_

**Direct Deposit details:**      **Account Name:**      **GCRBI**  
(Reference: please use your      **BSB:**      **124 065**  
Surname)      **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](mailto:roslyn@rojotrading.com)**

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For office use only

Receipt No: \_\_\_\_\_ Date paid: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date of Committee Meeting: \_\_\_\_/\_\_\_\_/\_\_\_\_ Membership: Accepted: \_\_\_\_/ Declined: \_\_\_\_  
Membership Class Accepted:      Founding: \_\_\_\_\_ Life: \_\_\_\_\_ Individual/F: \_\_\_\_\_ Junior: \_\_\_\_\_ Honorary: \_\_\_\_\_  
Applicant advised of decision \_\_\_\_/\_\_\_\_/\_\_\_\_ Rct.Ack: \_\_\_\_\_ Membership No: \_\_\_\_\_