



ABN 36 037 551 608

Incorp No A0051926L

PO Box 5166, Moreland West, Victoria 3055
info@ewha.com.au

APPLICATION FOR MEMBERSHIP OF EWHA INC

I, _____ (Please print name clearly)
desire to become a member of Encouraging Women in Horticulture Australia Incorporated.
In the event of my admission as a member, I agree to be bound by the rules of EWHA for the time being
in force.

Signature of Applicant

Date of application

Professional name/Occupation _____

Address for register _____ Post Code _____

Correspondence to _____ Post Code _____

Telephone _____ Email _____

1. Current position/s & organisation/s for whom you work

2. List any formal/recognised horticultural qualifications or significant experience in the horticultural
industry. (Attach a separate sheet if required)

Do you have any event suggestions?

Do you consent to your image being included when we post our photos online? **YES/NO**

Do you consent to your testimonials being posted online? **YES/NO**

Full Member - **\$85.00 p/a** or Student - **\$65.00 p/a** (GST not applicable)

Not-For-Profit Organisation Membership (up to 3 members) - **\$180.00 p/a** (GST not applicable)

Corporate / Business / Government Membership (up to 5 members) - **\$375.00 p/a** (GST not applicable)

Method of payment (please tick)

Cheque OR Money Order payable to *Encouraging Women in Horticulture Australia Inc*

Cash

Direct Deposit to: Encouraging Women in Horticulture Australia Inc - BSB 633 000 A/c 150126902

Office use only.

Membership approved/declined _____ Membership date of joining _____

Paid to _____

Cheques or money orders will not be banked until membership is approved. If membership is not approved, they will be returned and
direct deposits and cash, will be refunded.