

CHANGE OF MEMBERSHIP

MEMBERSHIP NUMBER: _____

I WISH TO CHANGE (please cross the appropriate box)

Type* Trading Name Representative Prefix Address Phone Fax Mobile Email

PLEASE NOTE: that a fee applies for change of trading name change of prefix, see fees listed. Membership Type* is if you wish to upgrade or downgrade your membership, eg upgrade from Commercial C to Full F.

PREVIOUS DETAILS (THIS SECTION MUST BE COMPLETED)

Type: _____

Trading name: _____

Representative: _____

Prefix: _____

Address (postal): _____

State: _____ Code: _____

Phone: _____ Fax: _____ Mobile: _____

Email: _____

NEW DETAILS (ENSURE YOU HAVE COMPLETED THE ABOVE SECTION ADVISING OF PREVIOUS DETAILS BEFORE ADVISING NEW DETAILS)

Type: _____

Trading Name: _____
\$110 GST Inc

Representative: _____

Prefix: _____
\$110 GST Inc

Address (postal): _____

State: _____ Code: _____

Phone: _____ Fax: _____ Mobile: _____

Email: _____

I request that the above change/s be made to my membership.

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

PLEASE NOTE: that this document must be signed only by the Authorised Representative on the membership being changed. If this document is signed by anyone other than the Authorised Representative it will be returned and no changes will be made until correct signature can be provided.

COMPLETE ONLY IF CHANGING MEMBERSHIP TRADING NAME OR PREFIX (Cash not accepted)

Please be advised that payment by credit card will incur a 2 % service fee

Cheque Visa Mastercard EFT

Card No: _____

Expiry Date: / CVC: _____

Name on Card (print): _____

Signature: _____

Amount: \$ _____ Being for: Prefix Trading Name

ELECTRONIC TRANSFER DETAILS: BSB No: 062 501 Account No: 1030 8024