**Application for Associate Membership**

Business name: ......……………………………………………………………………………

Cider brand: ......……………………………………………………………………………

Primary contact: ......……………………………………………………………………………

Email: ......……………………………………………………………………………

ACN/ABN: ......……………………………………………………………………………

Postal address: ......……………………………………………………………………………

Telephone: ……………………………..…….Mobile:……………….…………………………..

Location of cidery (if applicable): ......………………………………………………………………

**Interest in cider industry**

|  |  |
| --- | --- |
| *Please tick* | *Your interest in cider* |
|  | *supplier* |
|  | *trade* |
|  | *media* |
|  | *other ……………………………* |

**Nomination**

I: ……………………………………………………………….. a member of Cider Australia, nominate the applicant for membership of Cider Australia.

Signature of proposer: …………………………………Date: …………………………….

I: …………………………………………………………………a member of Cider Australia, second the nomination of the applicant for membership of Cider Australia.

Signature of seconder: …………………………………Date: …………………………….

**Statement of application**

On behalf of the above organisation, I: .......................................................................

Holding the position of: …………………………………………………………..…

hereby apply for membership of Cider Australia. I have read and understood the constitution of Cider Australia, and upon approval as a member, agree to be bound by those terms. Membership is not valid until Cider Australia has received and accepted this application.

Signature*: ………………………………………*Date: ……………………………………………..

*Note: an invoice will be issued to the contact by email once this application has been processed and accepted. The annual fee for an Associate Membership is $350.*