



NURSERY & GARDEN INDUSTRY QUEENSLAND

A.B.N. 92 914 028 835

APPLICATION FOR MEMBERSHIP (or Change of Ownership)

Registered Business Name: _____
(Membership will be identified using this name)

Business Structure: Sole Trader: Partnership: Other: Please specify _____

Company: Company Name: _____ ABN: _____

Business Location: _____

Postal Address: _____

Tel: Business: _____ After Hours: _____

Facsimile: _____ Mobile: _____

Email Address: _____

Website Address: _____

Principals/Directors of Business: (Directors must be identified)

_____ Position: _____

_____ Position: _____

Contact Person: (if different to Principals/Directors)

_____ Position: _____

I/We _____ being

Principals/Directors of (Business Name) _____
being a person/firm engaged full time in the nursery industry or in fields allied thereto, hereby make application for membership of the Nursery & Garden Industry Queensland (NGIQ) and agree to be bound by the rules and by-laws of the Association. I/We understand that as a member of NGIQ I/We automatically become a member of the Nursery & Garden Industry Australia (NGIA). Details of our activities follow:

I/We operate a _____
(Retail, Production, Allied Trade, other-specify) business.

I/We specialise in the following:
(provide a brief description for inclusion in the National Trade Register and the NGIQ Website) _____

