

# Membership Application Form 2022



*\*All fields are mandatory*

## CONTACT DETAILS

Name \_\_\_\_\_ DOB: / / \_\_\_\_\_

Postal Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

**MEMBERSHIP:** *Membership is fully tax deductible*

**Are you a farmer?**

Yes  No

### FULL MEMBERSHIP

### Rate (including GST)

- |   |                              |
|---|------------------------------|
| <input type="checkbox"/> AgConnectWA                            | \$75 per annum               |
| <input type="checkbox"/> AgConnectWA under 25                   | \$50 per annum               |
| <input type="checkbox"/> AgConnectWA under WAFarmers Membership | Free (must provide member no |

**WAFarmers Membership No**

Wool  Meat  Dairy  Grains

Other (please specify): \_\_\_\_\_

## PAYMENT

### Pay by credit card

Please charge \$\_\_\_\_\_ to my (please check one box)  VISA  MASTERCARD

Name on card \_\_\_\_\_ Card Number \_\_\_\_\_

CVC \_\_\_\_\_ Expiry \_\_\_\_ / \_\_\_\_


I (full name) \_\_\_\_\_ of above address  
authorise The Western Australian Farmers Federation Inc to debit funds from the financial institution account as  
details below to validate my membership to AgConnectWA.


By signing this credit card request I acknowledge the terms and conditions governing debit  
arrangements between myself, AgConnectWA and The Western Australian Farmers Federation Inc.


Signed \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

 <https://www.facebook.com/WAagconnect/>

 <https://twitter.com/AgConnectWA>

 [www.youtube.com/user/AgConnectWA](http://www.youtube.com/user/AgConnectWA)

 [AgConnectWA](#)

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## INVOLVEMENT IN AGRICULTURE

Please explain your involvement in the agricultural sector.

- Agribusiness   
  Law   
  Employed on a farm   
  Farming organisation  
 Machinery   
  Transport   
  Family connections   
  No involvement  
 Other (please specify): \_\_\_\_\_

## HOW DID YOU HEAR ABOUT AGCONNECTWA?

- Social media   
  Word of mouth   
  Attended an AgConnectWA event   
  Radio  
 Attended a WAFarmers event   
  Print media (Countryman, Farm Weekly, etc)  
 Website   
  Search engine   
  Forum or blog   
  University/studies  
 Other (please specify): \_\_\_\_\_

## MEMBERSHIP DECLARATION AND SIGNATURE

I wish to become a member of the AgConnectWA and agree to abide by the organisation's rules as set out in the AgConnectWA Constitution.

Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## PRIVACY ACT

The information you provide to AgConnectWA is used by AgConnectWA and The Western Australian Farmers Federation Inc to administer your membership and in the provision of membership benefits. The information provided may be used to contact and advise you of other member services or products. You may elect to cease receiving such information at any time by contacting AgConnectWA by way of The Western Australian Farmers Federation Inc through the methods below. Your personal information will not be disclosed without your consent for any other purpose unless required or authorised by law. You may request access to your personal information and, if necessary, request AgConnectWA update your records by contacting the Membership Coordinator in writing at WAFarmers, PO BOX 556, Belmont WA 6984.

**RETURN TO THE WESTERN AUSTRALIAN FARMERS FEDERATION INC:**  
 PO Box 1105 Bentley DC 6983, or email [reception@wafarmers.org.au](mailto:reception@wafarmers.org.au)


*Membership will commence on receipt of payment.*


### FOR OFFICE USE ONLY


Membership Number \_\_\_\_\_  
 Zone \_\_\_\_\_  
 Date Entered \_\_\_\_\_  
 Invoice Number \_\_\_\_\_

- Email sent to Member  
 Details to Finance and Administration Manager  
 Details to other relevant departments

 <https://www.facebook.com/WAagconnect/>

 <https://twitter.com/AgConnectWA>

 [www.youtube.com/user/AgConnectWA](https://www.youtube.com/user/AgConnectWA)

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