

Application for Membership of Harbourside Liquor Accord Incorporated
(Incorporated under the *Associations Incorporation Act 2009*)
2017-2018

Please complete both pages of this application form and return by email or mail.

On receipt, the Committee will complete the Proposer and Seconder details.

On receipt of payment this form becomes your tax invoice receipt.

Please retain a copy for your accounting records.

Your log in details for the Accord website will be emailed to you with confirmation of membership.

I, _____
[full name of applicant]

of _____
[address]

[occupation]

hereby apply to become a member of the abovenamed incorporated association. In the event of my admission as a member, I agree to be bound by the constitution of the association for the time being in force.

Signature of applicant _____ Date _____

I, _____
[full name of proposer]

a member of the association, nominate the applicant for membership of the association.

Signature of proposer _____ Date _____

I, _____
[full name of seconder]

a member of the association, second the nomination of the applicant for membership of the association.

Signature of seconder _____ Date _____



Application for Membership of Harbourside Liquor Accord Inc.
Incorporated (incorporated under the Associations Incorporation Act 2009)
ABN 60 707 879 960

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR TAX PURPOSES
THIS FORM BECOMES YOUR TAX INVOICE ON PAYMENT

VENUE NAME _____

ADDRESS _____

LICENSE NO. _____ LICENSEE _____

EMAIL _____

TELEPHONE _____ MOBILE _____

ALTERNATE CONTACT PERSON/TITLE(OPTIONAL) _____

EMAIL _____

TELEPHONE _____ MOBILE _____

MEMBERSHIP CATEGORY

FULL YEAR

PARTIAL PRO RATA

1 JULY 2017—30 JUNE 2018

1 MARCH 2018 TO 30 JUNE 2018

<input type="checkbox"/>	Hotel Club Nightclub	\$220 (incl GST)	\$132 (incl GST)
<input type="checkbox"/>	Bottle Shop Off Premise	\$165 (incl GST)	\$99 (incl GST)
<input type="checkbox"/>	Restaurant Cafe Small Bar Other	\$110 (incl GST)	\$66 (incl GST)
<input type="checkbox"/>	Non-Licensee Property Owner	\$55 (incl GST)	\$33 (incl GST)

PAYMENT OPTIONS

EFT: Transfer funds and email completed form to info@harboursideliquoraccord.com.au

Account Name Harbourside Liquor Accord Inc.

BSB 032-099

Account No. 554762

Reference: *Your Venue Name*

CHEQUE: Payable to HARBOURSIDE LIQUOR ACCORD INC.

Post cheque & completed form to: PO BOX 5, EDGECLIFF NSW 2027

ENQUIRIES: Lyndall Lee Arnold, Liquor Accord Secretary

E: info@harboursideliquoraccord.com.au M: 0414 681 177

Harbourside Liquor Accord Incorporated
INC9896457 | ABN 60 707 879 960

PO Box 5 Edgecliff NSW 2027 | info@harboursideliquoraccord.com.au
www.harboursideliquoraccord.com.au