



Diamond Creek Traders Association
ABN 87 407 821 737
PO Box 234
DIAMOND CREEK VIC 3089
E:heidi@diamondcreekshopping.com.au

Diamond Creek Traders Association - Membership Application

Name: _____

Business Name: _____

Business Address: _____

Postal Address: _____

Phone: _____ Mobile: _____

Email Address: _____

Name & Position of Representative (1) _____

Name & Position of Representative (2) _____

Brief description of your business – Services provided:

By signing this form I confirm that I would like to become a member of the Diamond Creek Traders Association and will support the purpose of the Association. I furthermore agree to comply, within the best of my ability, with the Diamond Creek Traders Association Model Rules.*

APPLICANT NAME: _____

SIGNATURE: _____

☐ Diamond Creek Traders - Special Rate Member

☐ Associate Member (Under 15)**

☐ General Member**

* This clause is required per *Rule 9, Application for Membership* under the Diamond Creek Traders Association Model Rules.

** Upon receipt of this Application you will be advised of the Annual Fee and the date in which this fee is due, which will be set at the Annual General Meeting of the Diamond Creek Traders Association on 1st October, 2014.

Office only:

Date received ___/___/___ Approved ___/___/___ Advised of outcome ___/___/___