



**Australian  
Banana  
Growers**

# MEMBERSHIP FORM

Please fill out this form and return to  
Mail: PO BOX 309, BRISBANE MARKET QLD 4106  
Email: members@abgc.org.au Fax: 07 3278 4938  
*If you have any questions please call 07 3278 4786*

## MEMBER DETAILS

Full Name of Applicant \_\_\_\_\_

Business / Trading Name \_\_\_\_\_

Farm Address \_\_\_\_\_

Postcode \_\_\_\_\_

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

Postcode \_\_\_\_\_

Phone Fax \_\_\_\_\_

Mobile Phone \_\_\_\_\_

ABN Number \_\_\_\_\_

Email Address \_\_\_\_\_

Are you already paying ABGC's Membership Fee and believed you were a member? \_\_\_\_\_

Yes

No

Would you be interested in being featured in ABGC marketing materials? \_\_\_\_\_

Yes

No

## MEMBERSHIP PAYMENT

*To be listed on the ABGC membership register and receive full member benefits, members must pay the 0.22c/kg (that is, \$0.0022/kg) membership fee. This can be paid directly to ABGC or can be collected through a participating wholesaler. ABGC will contact you regarding your first payment after your application is received.*

**Please select your preferred payment method.**

**Directly to ABGC** - Please select one option. Monthly  Quarterly

**Through a wholesaler/s** - please provide details below.

1. Wholesaler Name: \_\_\_\_\_

Ph: \_\_\_\_\_

2. Wholesaler Name: \_\_\_\_\_

Ph: \_\_\_\_\_

**Would you be happy for ABGC to contact your wholesaler on your behalf regarding payment?** Yes/ no  
(Please circle)

How many acres is your farm? \_\_\_\_\_

Variety grown: \_\_\_\_\_

*I hereby apply to become a member of Australian Banana Growers' Council Incorporated (ABGC). When approved by the Board as a member, I agree to be bound by the Rules and ensure that the ABGC's Member fee is payable on the bananas I produce. I also consent to ABGC obtaining details from the Wholesaler(s) of ABGC Membership payments made by the Wholesaler(s) on my behalf.*

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_