

Membership Application

Member Details

Details Organisation _____ ABN _____
Primary Contact _____ Position Title _____
Mobile _____ Phone _____
Email _____
Website _____
Postal Address _____
Secondary Contact (optional) _____ Email _____

Account Contact Details (Please list the contact for invoices to be forwarded to)

Name _____ Email _____
Phone _____

Membership Category (Annual Subscription)

- | | |
|--|----------------|
| <input type="checkbox"/> Corporate Partner | \$20,000 + GST |
| <input type="checkbox"/> Corporate Plus Member | \$8,000 + GST |
| <input type="checkbox"/> Corporate Member | \$3,000 + GST |
| <input type="checkbox"/> Sole Trader/ Start Up | \$1,000 + GST |
| <input type="checkbox"/> Community Organisation member | \$1,000 + GST |

In applying for membership of Committee for Gippsland, I acknowledge that this application must be approved by the Committee for Gippsland Board. Membership will be for the full calendar year effective from date of Board approval.

Subject to approval of the application, an invoice will be issued. Your membership will become effective from date of payment.

Signature of Applicant _____ Date _____

Please complete and email to info@gipps.com.au

Committee for Gippsland Inc.

Morwell Innovation Centre
1 Monash Way, Morwell 3840 Victoria

PO Box 3135, Gippsland MC VIC 3841
P (03) 5623 3219 E info@gipps.com.au

Proudly delivering



Details regarding your Business

Industry Type (Please tick the closest Industry your business would fit into)

- | | |
|---|--|
| <input type="checkbox"/> Agricultural | <input type="checkbox"/> Forestry & Fishing |
| <input type="checkbox"/> Manufacturing, Mining, Construction, Electricity | <input type="checkbox"/> Gas, Water & Waste |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Retail Trade |
| <input type="checkbox"/> Accommodation & Food Services | <input type="checkbox"/> Transport, Postal & Warehousing |
| <input type="checkbox"/> Information Media & Technology | <input type="checkbox"/> Financial & Insurance Services |
| <input type="checkbox"/> Rental | <input type="checkbox"/> Hiring & Real Estate Services |
| <input type="checkbox"/> Professional, Scientific & Technical Services | <input type="checkbox"/> Administration & Support Services |
| <input type="checkbox"/> Public Administration & Safety | <input type="checkbox"/> Education & Training |
| <input type="checkbox"/> Health Care & Social Assistance | <input type="checkbox"/> Arts & Recreation Services |
| <input type="checkbox"/> Other _____ | |

Head Office Location (if different from above) _____

Year business was established in Gippsland _____ Number of employees (full time and Part time) _____

Be Involved

We welcome our members to be involved and engaged in the work we do. Please highlight the areas below that may be of interest to you, and our team will organise a time to further discuss your interests and keep you updated of opportunities in the future.

- Gippsland Hydrogen Cluster
- Sponsorship of Committee for Gippsland programs
- Mentoring of GCLP participants
- Consultation on Government policy areas (please specify key areas of interest)
- Other (please specify)

We are always interested to hear about your skills and experience that may be available to contribute to the work we do. Please outline your experience, skills and interest below: _____

Office Use Only

- | | | |
|---|---|---------------------------------------|
| Membership Application: | <input type="checkbox"/> Approved | <input type="checkbox"/> Not Approved |
| Outcome Noted in Minutes | <input type="checkbox"/> Yes. Date of meeting _____ | |
| Applicant notified of outcome | <input type="checkbox"/> Yes. Date email sent _____ | |
| Applicant Details entered on Register | <input type="checkbox"/> Yes. Date entered _____ | |
| Applicant Details entered in Reckon | <input type="checkbox"/> Yes. Date entered _____ | |
| Applicants Logo received and added to website | <input type="checkbox"/> Yes. Date entered _____ | |