

OSBORNE PARK AGRICULTURAL SOCIETY, Inc

Postal: PO Box 86
Osborne Park WA 6017

ABN: 80 509 103 776



www.opshow.com.au

"In Our Community"

APPLICATION FOR MEMBERSHIP

I, (first name), _____

(family name) _____

of (address) _____

Phone: _____ Mobile: _____

Email (Please print block capitals): _____

Hereby apply for membership of the Society in the class marked below (TICK ONE BOX ONLY) and agree to abide by the Rules and Regulations as contained in the Society's Constitution.

☐

FULL Membership - **\$33.00** (GST inc) with **full** voting rights and **ONE Family Pass** for 2 adults and 3 children for each day of the Annual Show.

OR

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ASSOCIATE Membership - **\$22.00** (GST inc) with **no** voting rights and **ONE Adult Pass** for each day of the Annual Show.

Signature: _____ Date: _____

Proposed by Committee Member (block capitals) _____

Seconded by Committee Member (block capitals) _____

This form, when completed, should be forwarded, with the annual fee, to the Secretary by email (secretary@opas.org.au) or by post (see above address). The fee can also be deposited directly into our account:

Bank: Bendigo Bank

BSB: 633 000

Account: 154 739 817

NOTES:

1. Both the Proposer and Secunder must be financial members of OPAS.
2. The application must be approved by the OPAS Management Committee.
3. If the application is not approved, the application fee will be refunded.

We gratefully acknowledge the support of:

