



MEMBERSHIP APPLICATION

Scientist, professionals and growers who manage, study and care for our forests

BRANCH

Please indicate which Branch/es you would like to receive updates from:

ACT	SA	VIC	QLD	Other
NSW	TAS	WA	NT	

PRIVACY

Forestry Australia members can have their name, State and email address listed on the Forestry Australia website in the member only content.

Please publish my details in the member list Yes, publish No, don't publish

CODE OF CONDUCT

The Forestry Australia Code of Conduct can be found at forestry.org.au/code-of-conduct

Do you agreed to abide by the Code of Conduct Yes No

PAYMENT DETAILS

- A. I would like to pay by credit card
- | | | |
|-------------------|------------|------|
| Visa | Mastercard | Amex |
| Card No | | |
| Cardholder's Name | | |
| Expiry Date | | CCV |
- B. Please email me a Tax Invoice

AUTHORISATION

I declare that the information provided is true and correct. I wish to apply for membership of Forestry Australia and agree to be governed by the Associations Constitution and Rules www.forestry.org.au.

I understand that subscription rates do change from time to time and if I wish to cancel my membership, I will do so in writing.

Signature

Date

Email this completed form to membership@forestry.org.au