ASSOCIATE Membership Application

Botanic Gardens Australia and New Zealand (BGANZ) Associate Membership is available to any organisation aligned with botanic gardens and arboreta but does not hold documented plant collections. Examples of eligible organisations may include gardens without documented collections, parks and reserves, zoos, educational institutions, cemeteries, nurseries, etc.

### CONTACT DETAILS

|  |  |  |  |
| --- | --- | --- | --- |
| ORGANISATION NAME |  | ABN | |
| WEBSITE |  | | |
| POSTAL ADDRESS |  | STATE |  |
|  |  | POSTCODE |  |
| STREET ADDRESS |  | STATE |  |
|  |  | POSTCODE |  |
| COUNTRY |  |  |  |

### NOMINATED REPRESENTATIVE

Person authorised on behalf of the organisation. ***All correspondence will be sent to this person***.

|  |  |  |
| --- | --- | --- |
| PREFERRED TITLE |  | |
| FIRST NAME |  | SURNAME |  |
| POSITION |  | | |
| TELEPHONE (W) |  | (M) |  |
| EMAIL |  | | |

### FURTHER DETAILS

How did you hear about us?

BGANZ website

Social media

BGANZ webinar

Another peak body/association

Recommendation

Event

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your main purpose for joining the network?

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### MEMBERSHIP FEES

Fees for all memberships become due on 1 July each year. Membership fees are in AUD and **do not include** GST.

An invoice will be issued upon acceptance of membership.

Membership fees may be tax deductible (*refer to your tax agent for details*). A tax invoice/receipt will be issued after processing.

|  |  |
| --- | --- |
| **Associate** membership fee | **$750.00 + GST** |

### DECLARATION

The BGANZ Constitution is available on the website: [www.bganz.org.au](http://www.bganz.org.au) or from the [Secretariat](mailto:secretariat@bganz.org.au).

|  |  |  |
| --- | --- | --- |
| In applying to become a member of BGANZ Ltd, we agree to subscribe to the objectives of the Company and comply with the rules governing membership as shown in the Constitution. | | |
| FULL NAME |  | |
| SIGNATURE |  | DATE |

Please return completed form to [media@bganz.org.au](mailto:media@bganz.org.au)