



MEMBERSHIP APPLICATION FORM

By applying for membership to Australian Country Party, you are agreeing to abide by our rules of membership and constitution. As a registered political party, we are required to periodically submit our membership data to both the AEC (Australian Electoral Commission) and the VEC (Victorian Electoral Commission). You can help us to maintain correct records by filling out all required fields on this form, and notifying us of any change in contact/address details as soon as possible.

“A Country Party for Country People”

If you care for the country, and the communities within, enjoy recreation and maintaining free access to public land, small business and farming, then Australian Country Party, is the party for you!

All fields marked with (*) **MUST** be completed. Please use a BLUE or BLACK pen only, and BLOCK LETTERS.

Title: (please circle) Dr / Mr / Mrs / Ms / Miss

*Surname: *Given Name/s:.....

*Date of Birth:/...../..... *Sex: M / F (please circle)
DD MM YYYY

*Residential Address: (as shown on Electoral Role)

*Unit/Street No:..... *Street Name:.....

*Suburb:..... *State: *Postcode:.....

Postal Address: (if different from above):

.....

..... State:..... Postcode:

For valid membership, we require at least **one** contact telephone number.

*Ph (H): (_ _) _ _ - _ _ - _ _ Ph (B): (_ _) _ _ - _ _ - _ _ *Mob: _ _ - _ - _ _

Email: _ _ _ _ _ @ _ _ _ _ _

*Are you registered on the **State & Federal** Electoral Rolls? Yes No

*Are you a member of another registered political party? Yes No

By ticking **NO**, you agree that you are **NOT** a member of another registered political party.

Payment information on rear.

*Signature: Date:/...../.....
DD MM YYYY

By becoming a member, you agree to abide by the bylaws and constitution of the Australian Country Party.

Payment details on reverse

Membership: 1 YEAR - \$20.00 4 YEARS - \$60.00

Junior M/ship (16 - 17 yrs): 1 YEAR - \$5.00

And/or Donation: \$.....

Enclosed is payment for the amount of \$.....

All cheques are to be made payable to "Australian Country Party"

Cheque Money Order Mastercard Visa

American Express not accepted

Card Number - - -

Name on card:.....

Expiry Date: /
MM YYYY

Signature: Date:/...../.....
DD MM YYYY

POST THIS FORM, WITH PAYMENT TO:

Australian Country Party
Membership Officer
PO Box 108
GOLDEN SQUARE
VIC 3555

Or

SCAN AND EMAIL THIS FORM TO:
membership@countryparty.org.au

countryparty.org.au