



2019/2020 Membership Form Contract Grape and Wine Processors

COMPLETE YOUR DETAILS

Company name: _____ **ACN/ABN:** _____

Address: _____

Postal address: *(if different from above)* _____

Phone: _____

Location of company: GI zone: _____ GI region: _____

Main contact *(membership and communications)* Name: _____ Job title: _____

Phone: Office: _____ Mobile: _____ Email: _____

Financial contact Name: _____ Job title: _____

Phone: Office: _____ Mobile: _____ Email: _____

Cellar door facilities: Y N
Do you export wine?: Y N

As a proud member we give permission for Australian Grape and Wine to display our company's name and logo as a member on their website: Y N

SIGN YOUR MEMBERSHIP FORM

On behalf of the above organisation, I *(name)* _____

holding the position of *(title)* _____ hereby apply for membership of the Australian Grape and Wine Inc.

In doing so I have read and understood the Constitution of Australian Grape and Wine Inc (available at agw.org.au) and upon approval as a member agree to be bound by those terms. Members of Australian Grape and Wine Inc are signatories to the ABAC scheme. Your membership becomes effective when Australian Grape and Wine Inc receives your signed and dated form.

Signature: _____ Date: _____ / _____ / _____

MEMBERSHIP

New Existing Membership number: _____ **2019 Production (tonnes):** _____

LEVY INFORMATION FOR GRAPE AND WINE PROCESSORS: *(levy amounts are inc GST)*

SMALL SIZED WINERY

2000 tonnes and below Levy \$575 inc GST

MEDIUM SIZED WINERY

2001-10,000 tonnes Levy \$2885 inc GST

Above 10,000 tonnes Levy \$5795 inc GST

TOTAL MEMBERSHIP LEVY \$ _____

PAYMENT OPTION

- EFT:** Australian Grape and Wine **BSB:** 035-000 **Account:** 739200
Please reference payment with company name or Australian Grape and Wine membership number and confirm by email to info@agw.org.au
- Cheque:** payable to Australian Grape and Wine Incorporated to accompany this form
- Credit card:** payments of Australian Grape and Wine levies can be made when completing an online membership form: www.agw.org.au/members/how-to-apply

RETURN THIS FORM

- Return this form:** PO Box 2414
Kent Town SA 5071; **OR**
- Email** info@agw.org.au; **OR**
- Phone** 08 8133 4300