



2019/2020 Membership Form Vigneron Membership

COMPLETE YOUR DETAILS

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

Address: _____

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

Phone: _____

Main contact Name: _____ **Job title:** _____

Phone: Office: _____ Mobile: _____ Email: _____

Financial contact Name: _____ **Job title:** _____

Phone: Office: _____ Mobile: _____ Email: _____

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 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: _____

Vineyard Size (hectares): _____

2019 Fruit Sold (tonnes): _____

<input type="checkbox"/> 0-300 tonnes Levy \$150 inc GST		
<input type="checkbox"/> Above 300 tonnes	Levy \$150 inc GST	= \$150.00+
Base levy of \$150.00 applies for the first 300 tonnes sold	Plus tonnes sold above 300 tonnes _____ x \$0.50	= \$
<i>Above 300 tonnes is calculated at \$0.50 per tonne and added to the base membership levy.</i>		
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