## Southern Queensland Natural Resource Management Ltd Individual Membership Application Form 2018/2019

Full Name:								
Of (street address):								
City/Town:		State:		Postcode:				
Email address:								
Phone number:								
I wish to apply for membership of Southern Queensland Natural Resource Management Ltd. and agree to be								
			tions of its Constituti					
□ Factorn Cub ragio		ace of resid	lence is in the (tick or	ie oniy):				
☐ Eastern Sub-region								
☐ Western Sub-region								
Outside, but with a strong interest in the region.  I am interested/have knowledge and skills in (tick three only):								
☐ Practical on-ground natural resource ☐ Land management and Land Use planning								
management	•			☐ Community participation and development				
☐ Water and Water Quality			Conservation					
☐ Industry including Agriculture			☐ Aboriginal interests and cultural assets					
☐ Catchment manag	•		☐ Weed and feral animal management.					
☐ Climate	,		Weed and refar animal management.					
		<u>L</u>						
Membership fee:								
The membership fee for an individual applicant for the 2018/2019 Financial Year is: \$0.00								
Members commitme								
By applying for membership, you agree to be bound by the Constitution of Southern Queensland Natural								
Resource Management Ltd.								
Cianad b								
Signed by:					1			
Name:	Signat	ture:		Date:				
OPTIONAL:								
Other relevant								
groups that I								
am a member								
of in the region (i.e. landcare):								
(i.e. iailucate).								
Office use only:								

Southern Queensland Natural Resource Management PO Box 1670 Toowoomba Qld 4350 members@sqnrm.com.au

Date received:	Date:	
Entered on	Name:	
applicant		
register by:	Date:	
Board	Date:	
approval:		
Entered on	Name:	
member		
register by:	Date:	