



FERGUSON VALLEY MARKETING INC
2018 NON MEMBER - MEMBERSHIP APPLICATION FORM

Contact Details

Business Name _____
Contact _____ **Position** _____
Location Address _____
Postal address _____
Phone _____ **Email** _____
Mobile _____ **Website** _____

FVM Membership Level (Please indicate correct number of employees)

- Individual & Not-for-Profit Organisations \$44 (GST Inc.)
- Level A - Business with no employees \$82.50 (GST Inc)
- Level B - Business (1-5 Employees) \$176 (GST Inc)
- Level C - Business (6-10 Employees) \$236.50 (GST Inc)
- Level D - Business (Over 10 Employees) \$330 (GST Inc)

Additional Information Required

- Current copy of Public Liability Insurance Certificate of Currency
- Certificate of Registration of Business Name
- AAA Accreditation attached (Accommodation Providers Only)
- Return three (3) high quality pictures for use on FVMP Website
- Opening times/days _____

Non-Member Racking Fee (Subject to FVM Approval)

- Annual Fee (Brochure Display at Visitor Centre Only) \$66 (GST Inc)

Your Business Description (to be used on the FVMP Website)

Please provide up to 150 words outlining your business. This description will also be used by FVM in marketing and media activities. (Attach page if required) _____

I have read, understood & agree to Responsibilities as a Member (See Prospectus)

Name _____ **Title** _____
Signed _____ **Date** _____

Return Completed Form To:

By Mail: **The Administration Officer**
 Ferguson Valley Marketing Inc
 .PO Box 7180, EATON WA 6232 **OR** Email marketing@fergusonvalley.net.au

Your application will be submitted to the Board for endorsement. Once approved your Welcome Kit & Tax Invoice will be forwarded. Any queries please contact Brigitte Milligan on 0428 281 551.

Payment Options (Prompt payment is required by either) :

- Cheque: Ferguson Valley Marketing & Promotions Inc, PO Box 7180, Eaton WA 6232
- Electronic: Ferguson Valley Marketing & Promotions Inc,
 BSB: 633 000 ACC: 147 462 691 (Please Quote Inv#)

Office Use Only

Received	Database	Accreditation	Invoice #	Payment	Kit Sent	Insurance	Website