

MEMBERSHIP APPLICATION

MEMBERSHIP DETAILS

NAME

COUNCIL

EMAIL

MOBILE

BUSINESS ADDRESS

POSTAL ADDRESS

I would like to become a member of Municipal Works Australia Incorporated and hereby agree to abide by the Associations Rules and Code of Conduct.

SIGNATURE OF APPLICANT

DATE

POSITION

MEMBERSHIP CATEGORY AND FEES

Membership Category and Fees

☐ General FREE

☐ Local Government Corporate \$1,100

PAYMENT OPTIONS

PAYMENT OPTIONS:

- ☐ Please Invoice
☐ Direct Debit Payment

BSB: 063 898
Acc#: 1000 2532
Email Remittance:
admin@municipalworks.com.au

CREDIT CARD ☐ VISA OR ☐ MASTERCARD

Name on Card

Card Number:

Expiry:

Authorised Signature: