

THE MASTER FISH MERCHANTS' ASSOCIATION OF AUSTRALIA

Representing Professional Seafood Merchants'

Membership Application Form 2018

APPLICANT INFORMATION

Full Name of Applicant:

Business Name:

Postal Address:

Business Address:

Phone

Fax:

Email:

MEMBERSHIP TYPE

Full Membership - NSW applicants only (\$264 including GST)

Associate Membership - Interstate memberships only (\$132 including GST)

BUSINESS TYPE

Seafood Retailer - Fresh

Seafood Retailer - Cooked

Seafood Retailer – Cooked & Fresh

Wholesaler

Wholesale & Retail

Exporter

DECLARATION

I hereby apply to become a full member / associate member (**cross out that which DOES NOT apply**) of the Master Fish Merchants' Association of Australia. In the event of my admission as a full member / associate member (**cross out that which DOES NOT apply**) I agree to be bound by the rules of the association.

Signature of Applicant:

PAYMENT METHOD

(Please tick the correct box below to indicate how you intend to pay for membership)

Sydney Fish Market buyers account (complete below):

Cheque:

DIRECT DEBIT AUTHORITY

I/We _____ request Sydney Fish Market Pty Limited until further notice in writing to debit my/our account described in the schedule below, the amount of \$22 (including GST) per calendar month, or other such amount as approved by the Master Fish Merchants' Association of Australia Committee of Management and advised to Sydney Fish Market Pty Ltd in writing, and upon payment by me/us, to remit the sum so debited to the Master Fish Merchants' Association of Australia.

Account Name (Buying Name):

Account Number:

Date:

Signature of Applicant:

Please return to:

The Master Fish Merchants' Association of Australia
Locked Bag 247, Pyrmont NSW 2009

Contact details - Ph:(02)9552 1611 Fax: (02)9552 3171
Website: www.mfma.com.au Email: michael@mfma.com.au