THE MASTER FISH MERCHANTS' ASSOCIATION OF AUSTRALIA

Representing Professional Seafood Merchants'

Membership Application Form 2026

APPLICANT INFORMATION		
Full Name of Applicant:		
Business Name:		
Postal 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	□ Independent buyer	□ 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 or Direct Deposit:

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 – Mobile 0421 017 802
Website: www.mfma.com.au Email: michael@mfma.com.au