

# Application for Membership



Please complete and return this form to:  
Marine Queensland  
PO Box 3305  
Tingalpa DC QLD 4172  
(T) 07 3390 4657 (F) 07 3390 4962 (E) [info@marineqld.com.au](mailto:info@marineqld.com.au)

I/We the undersigned hereby apply for membership of Marine Queensland.

## BUSINESS DETAILS

Company/Business Name:		
Office Address:	Postcode:	
Postal Address:	Postcode:	
ABN:	Phone:	Fax:
Mobile:	Email:	
Website:		
Date of Commencement of Trading: . . . . / . . . . / . . . .	No of Employees:	
Public Liability Insurance? (If "yes" please attach a copy to your application)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

## DIRECTORS' NAMES & ADDRESSES

Name:	Position:	
Address:		
Name:	Position:	
Address:		
Are any of the Directors or Principals currently involved in any other Company or Business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details		

## DECLARATION

I/We declare that the information presented on this application form is true and correct.  
If accepted as a member of Marine Queensland I/we hereby agree to be bound by the Memorandum and Articles of Association of Marine Queensland, and by any amendments made thereto, and to pay any annual subscription fees or levies as the Association shall from time to time determine.  
I/We also agree to support the aims and objectives of the Association and to conform/abide by its Rules and Code of Ethics.  
I/we understand that the submission of my/our cheque does not mean acceptance or any other entitlement of membership of Marine Queensland, and until a decision is relayed to me/us in writing, I/we are not entitled to use the Association logo or in any way indicate that I/we are a member of Marine Queensland.

Signed:
Date:

