



North Queensland Civil Construction Association Inc.

Membership Application Form

Membership Application

Membership Renewal

MEMBERSHIP NUMBER _____ (if renewal please put your current member number)

Personal Information

First name:

Surname:

Phone: (AH)

(M)

Email:

Business Information

Business Name:

ABN / ACN:

Postal address:

Business address:

Phone: (W)

(M)

Email:

Web Page:

DECLARATION BY APPLICANT

I, (signature of Applicant) _____ certify that the information given by me is correct and hereby make application for membership of the North Queensland Civil Contractors Association (NQCCA) and agree to be bound by, and to conduct myself in accordance with, the respective constitution, by-laws, rules, policies and procedures of the NQCCA.

Your privacy is your priority. All personal information you have provided will help us process your application to become a member. NQCCA may use your information to communicate with you and inform you of activities and events.

Payment Details Direct deposit to: MacDonnells Law Practice Trust Account for NQCCA

BSB No. 014 734

Acc No. 8370 85958

Ref: 180490

Committee use only		Date:
Nominated by:	Seconded by:	Amount paid: \$