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2018 MEMBERSHIP APPLICATION

TITLE:	Mr/Mrs/Miss/Ms	D.O.B:	/ /
SURNAME:			
FIRST NAME:			
POSTAL ADDRESS:			
SUBURB:		POST CODE:	
HOME PHONE:		MOBILE:	
EMAIL:			

- | | |
|---|--|
| TYPE OF MEMBERSHIP: | RENEWAL / NEW (Please circle) |
| MEMBERSHIP FEES: | (Tick Applicable) |
| <input type="checkbox"/> Membership | \$45.00 (includes one guest pass) |
| <input type="checkbox"/> Additional Adult | \$25.00 (<u>one only</u> additional adult per membership) |
| <input type="checkbox"/> Child | \$15.00 (age prep to 16 years) |
| <input type="checkbox"/> Life Membership | \$450.00 (includes one guest pass) |

MEMBERSHIP AND GUEST PASSES ARE NON-TRANSFERABLE.

Wristbands will be issued for Member & Guest to gain entry to the Ipswich Show, which MUST BE WORN for the day specified.

Members will also receive a Membership ID card to obtain discounts as per Membership Info form.

I HEREBY MAKE APPLICATION TO JOIN IPSWICH SHOW SOCIETY AND AGREE TO ABIDE BY THE RULES AND BYLAWS.

SIGNED:.....**Date:**.....

Office Use Only:

Date:.....Receipt No:..... Membership no:.....

Signed:.....(Secretary)

Moved by:.....Seconded by:.....

- | | | |
|------------------------------|--|-------------------|
| Wristband Issued: Member | - Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun <input type="checkbox"/> | Date Issued:..... |
| Wristband Issued: Guest | - Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun <input type="checkbox"/> | |
| Wristband Issued: Add. Adult | - Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun <input type="checkbox"/> | |
| Wristband Issued: Add. Child | - Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun <input type="checkbox"/> | |