Agricultural Bureau of South Australia Inc.
PATHWAY TO IMPROVEMENT

GPO Box 1671, ADELAIDE SA 5001 ABN: 34 458 788 686

MEMBER INVOICE and DETAILS SHEET 2010/2011

COST: Branch $_____ plus Ag Bureau SA Inc $33.00 (inc GST of $3.00) = TOTAL $_____

Please make cheque payable to your local Bureau Branch.
Please provide/post payment and this form to your Branch Treasurer by _____, address: _____

DEAR MEMBER PLEASE NOTE: *For the Bureau's and members benefit, members are asked to complete this form and return to your Branch Treasurer. Please note, non-financial members are not covered by insurance for any Branch/Ag Bureau activities, are not eligible to apply for Bureau Project Funds and the ABA is not be able to support them. For you to be covered by the AgBureau Insurance cover your details below need to be correctly recorded at the Ag Bureau Inc office. Please be assured that the security of the personal details of Bureau members are managed appropriately.*

Surname: _____ *First Name:* _____ *Gender:* ☐ Male ☐ Female

Telephone: _____ ***FACSIMILIE:*** _____ *Date of Birth:* _____

EMAIL: _____ *Mobile:* _____

Address: _____

Branch: _____ *Year Joined:* _____

Prefer communication via:
☐ Email ☐ Fax ☐ Post

What do you do on the farm?
☐ Farm Hand ☐ Farm Manager ☐ Farmer Owner / Operator ☐ Share Farmer

Work - On the farm
☐ Casual ☐ Full time ☐ Part time

Work - Off the farm
☐ Agribusiness ☐ Retired ☐ Other: _____

Farm Size
☐ 10 Hectares or less ☐ 11 to 1,000 Hectares ☐ 1001 to 2,000 Hectares ☐ More than 2,000 Hectares

Farm Enterprises / Interests (tick all applicable boxes)

☐ Beef Cattle	☐ Bees	☐ Cereal	☐ Dairy Cattle
☐ Forestry	☐ Goats	☐ Grain Legume	☐ Hay/Fodder
☐ Horses	☐ Market Gardening	☐ Orchards	☐ Pasture
☐ Pigs	☐ Poultry	☐ Seed Production	☐ Sheep Meat
☐ Sheep Wool	☐ Tourism	☐ Vine	☐ Other: _____

Highest Educational Level
☐ Primary ☐ Secondary ☐ TAFE ☐ Tertiary

Where do you live?
☐ On Farm ☐ Town/Off Farm ☐ Other: _____

☐ **All detail checked and correct (please tick)** Member's Signature: Date:

BRANCH TREASURER USE ONLY: Date received by Branch: _____
Treasurer to provide member tax invoice/receipt below.

% ---------- % ---------- % ---------- % ---------- %

MEMBERS TAX INVOICE/RECEIPT Provided once payment has been received.

Fees for membership of the local Branch and Agricultural Bureau of SA Inc
GPO Box 1671, Adelaide SA 5001 ABN: 34 458 788 686 for 2010/2011

COST: Branch $_____ plus Ag Bureau SA Inc $33.00 (inc GST of $3.00) = TOTAL $_____

AgB Branch Treasurer Signature: _____ Date: _____