

2023/2024 Financial Year

Olives South Australia Incorporated

Application/Renewal for Membership

Surname:				
First Name:				
Contact Numbers:				
Email:				
Postal Address:				
			Post cod	de:
Industry Involvement	t:			
	Grower	Processor	Judge	Volunteer
	Food Industry	Service Provider	Other:	
Olive Grove Name:				
or Business Name:				
ABN:	# of Olive Trees:			
Business Website:				
Business Facebook:				
I consent to OSA menti and Newsletters for pro			_	a Yes / No
Renew my Memb	ership of Olives South	Australia Inc for \$8	38.00	
Apply to become	a Member of Olives Sc	outh Australia Inc fo	or \$88.00	
I agree to be bound by information on this for		ives South Australia	a Incorporated, and I	declare that all the
Signature:			Da	te:
Application/renewal	form to: Email: <u>e</u>	nquiries@olivessou	uthaustralia.org.au	
	Postal: N	1embership C/- 38	8 Hunter Rd, Christi	ies Beach SA 5165
Membership Fee is \$88.0	0 (inclusive of GST), paya	ble to Olives South	Australia, BSB: 065-1	174, Acc: 10005877
PRIVACY NOTICE: OSA collects i keep you informed about indus the Australian Privacy Act.			•	=
OFFICE USE	Received//2023 Added to Membership L		Invoiced/receipted	//2023-24