**Application for Individual (associate) Membership**

I

Of

Wish to become a member of the Southwest Environment Alliance (S.E.A.) and so agree to the following conditions:

In the event of my admission, as a member I agree to be bound by the rules of the Organisation and have received & read the S.E.A. Strategic Plan and Code of Conduct. I agree to be bound by the vision, purpose and aims of the alliance.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as a member of S.E.A. nominate the applicant who is personally known to me for membership of the SE.A.

Name of member

Signature of member

|  |  |
| --- | --- |
| Name: |  |
| Postal Address: |  |
| Phone Number: |  |
| Email: |  |

Please direct deposit monies into our account or pay cash at a meeting.

**Account Name:** Southwest Environment Alliance

**BSB:** 633000 **Account Number:** 137790747

Reference your name and please send an email to our Secretary info@seaalliance.org.au confirming payment.

Membership is reviewed annually. Cost $10.00 per annum or $25 for 3 years.

Membership renewal is due each year during the month of May. A reminder notice will be sent in the first week of May via email. You will be asked to complete a new form, update your details and pay your subs. This process will facilitate easy administration for the renewal of S.E.A.’s Insurance and enable us to update our contact database efficiently and just once per annum. It will also ensure you receive your free copy of the Victorian Landcare Magazine.

Do your give permission to be photographed at meetings and other events host by the S.E.A. or our member groups?

🞏 Yes

🞏 No

If yes please fill in the section below.

PHOTO RELEASE FORM FOR INDIVIDUALS

I hereby grant permission to the Southwest Environment Allianceto use photographs and/or video of me taken any time while I am engaged in meetings, events, and other activities hosted by the Alliance or their member groups. This includes in publications, news releases, online, and in other communications.

This section is for parents or grandparents who have included children in their membership. (Signature of Adult, or Guardian of Children under age 18. Please include all family member’s names on the contact section above).

Signature