THE CO-OP FEDERATION

APPLICATION FOR MEMBERSHIP
THE CO-OPERATIVE FEDERATION LTD
(a non-distributing co-operative without share capital)

Name of Applicant: _____
(Name of Co-operative/Body Corporate)

Postal Address: _____

Street Address: _____
(Actual location)

Phone: ( ) _____ **Email:** _____
(Membership invoices sent to this address unless a contact is specified below)

I would like invoices to be sent to another email: _____
(Finance email)

Link to co-operative website: _____

Has the applicant co-operative/body corporate been in existence for less than twelve (12) months?

YES ☐ *Go to Nominated Representative of Applicant* NO ☐

Turnover less government grant funds for last financial year: 20____ /20____ $ _____

Nominated Representative of Applicant: _____

Mobile: _____ **Email:** _____

Relationship to Applicant: _____
(Member/Director/CEO/Secretary/Other – please specify)

I am authorised to act on behalf of the applicant named above and I:

- apply for it to be admitted as a member of The Co-operative Federation Ltd
- appoint the above-named person to represent it in relation to its membership
- consent to the use of the above email address for the services of notices from the Federation.

If this application is approved, the applicant agrees:

- it will pay all fees required by the Federation
- it will be bound by the Rules of the Federation
- that the contact details of the applicant may be circulated to all other members of the Federation to assist with networking amongst co-operatives.

_____ _____ _____/_____/_____
(Name of Director/Secretary) (Signature of Director/Secretary) (Date)

Please complete and send to The Co-op Federation at info@fed.coop or GPO Box 1064, Sydney NSW 2001. A tax invoice for the membership fee will then be issued. For all enquiries please call Secretary Sam Byrne on 02 9057 5155, 0408 231 509 or email him at sec@fed.coop.