

HOW TO COMPLETE: Enter all applicable details. Applicant 1 is the person who will appear first in the register of members. Complete Applicant 2 only for a joint membership application.

Joint membership application? ☐ Yes ☐ No

Branch that referred you

JOINT MEMBERSHIP: The person whose name appears first in the register of members has the right to vote on behalf of the joint membership - Sections 33(2) and 33(4) of the N.Q. CO-OP Ltd Rules.

Applicant details

Details	Applicant 1	Applicant 2
Corporation Name (if applicable)		
Surname of Applicant		
Other Names		
Residential Address		
Postal Address		
Phone Number		
Facsimile Number		
Email Address		
Account Number		
Australian Business Number (ABN) *		
Tax File Number (TFN) *		

ABN / TFN: Quoting an ABN or TFN is optional. If neither is quoted, tax may be withheld from investment income at the top tax rate plus Medicare levy. See the membership notice on page 3.

Member application and declaration

1. I/We hereby make application to be admitted as a member of the Cooperative. I am / We are aware of the qualification for membership and the active membership provisions, and I/we believe I am/we are able to meet those requirements.
2. I/We make application to be allotted shares and agree to pay \$
being the full price for the allocation of the shares at the nominal value of \$2.00 each.
3. I/We are over the age of eighteen years.
4. On approval of this application by the Board, I/we agree to pay all charges required by the Cooperative and I/we agree to be bound by the rules and by any alterations thereof registered in accordance with the Co-operatives National Law (Queensland) Act ("the Act").
5. Have you previously been a Member? ☐ Yes ☐ No

Applicant execution

Application date (DD/MM/YYYY)

Applicant 1 signature / typed name

Applicant 2 signature / typed name

SECTION 120: Pursuant to Section 120 of the Act, no rights of membership shall be exercised until the member has made such payments or acquired such shares or interests as provided in the rules and their name appears in the register of members.

Board use only

Board decision

☐ Approved

☐ Not Approved

Board meeting date (DD/MM/YYYY)

Date entered in Register of Members

Signature of a Director / typed name

Signature of Secretary / typed name

NOTICE TO PERSONS INTENDING TO BECOME A MEMBER OF N.Q. CO-OP LTD

Inspection of Documents: Notice is hereby given to persons intending to become a member of the Cooperative that the following documents are available for inspection at the registered office and at each other office of the Cooperative during displayed trading hours.

- A consolidated copy of the rules of the Cooperative;
- A copy of the most recent financial information reported to members; and
- A copy of all special resolutions other than those altering the rules.

Active Membership Requirements: A member shall purchase goods and/or services from the Cooperative to the value of a minimum of \$1,500 per year to establish active membership of the Cooperative. All members of a cooperative must be active members. A member who fails to be or stops being an active member under Section 156 of the Act, must have their shareholding cancelled.

Qualification for Membership: Every member must hold at least 100 but not more than 10,000 shares.

Qualification for Becoming a Director: To become a member director you must hold at least 1,500 shares and purchase goods and/or services from the Cooperative to the value of at least \$10,000 each financial year.

Application Form and Cost of Membership: To become a member you must complete an "Application for Membership" form and pay the full cost of \$2.00 per share applied for. No entry fees or regular subscriptions are applicable. A hardcopy of the rules of the Cooperative may be purchased for \$25.00.

Conditions of Membership: Completion of the "Application for Membership" form, and payment of the full application fee (of \$2.00 per share).

ABN AND / OR TFN: It is not compulsory to quote your TFN or ABN - it is your choice. However, if you do not quote your TFN or ABN an amount will be withheld from any investment income (i.e. dividends) paid to you at the top rate of tax plus Medicare levy. The amount withheld will be sent to the ATO.

If your application is approved you should receive your letter confirming the same. If you decide to surrender your shares, or move to a new address, please advise Support Office in Mareeba, and the appropriate paperwork will be forwarded to you.

If you have any enquiries regarding the above, please contact Support Office at Mareeba on (07) 4092 8400.

Applicant acknowledgement

☐ I have noted that the above disclosure documents are available for inspection at a Co-op office and have had the opportunity to undertake an inspection of the material.

Acknowledgement date (DD/MM/YYYY)

Applicant 1 signature / typed name

Applicant 2 signature / typed name