

AUSTRALIAN MUSHROOM GROWERS' ASSOCIATION

MEMBERSHIP APPLICATION

Title: _____ Surname: _____ Given: _____

Company: _____

Street Address: _____

Mail Address: _____

Suburb: _____ State: _____ Postcode: _____

Business Phone: _____ Fax: _____

Home Phone: _____ Mobile: _____

Email: _____

Trading As: _____

Staff Nos: _____ Length of time in business: _____ Annual Tonnage: _____

Please tick the box below as appropriate:

Type of Membership:	<input type="checkbox"/> Member	<input type="checkbox"/> Associate Member	
	<input type="checkbox"/> Employee Member	<input type="checkbox"/> Retired Producer Member	
Principal Activity:	<input type="checkbox"/> Spawn Distributor	<input type="checkbox"/> Substrate Supplier	<input type="checkbox"/> Grower
Position in Company:	<input type="checkbox"/> Owner	<input type="checkbox"/> Principal	<input type="checkbox"/> Employee
Farm Type:	<input type="checkbox"/> Bag	<input type="checkbox"/> Shelf	<input type="checkbox"/> Tray
	<input type="checkbox"/> Block	<input type="checkbox"/> Tunnel	<input type="checkbox"/> Mixed
Crops:	<input type="checkbox"/> Agaricus	<input type="checkbox"/> Exotics	
Make Own Substrate:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do You Sell to Other Farms:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

My Supplier is* (ie bag, block, compost supplier) _____

Nominated: _____ Date: _____ Seconded: _____ Date: _____

An invoice will be issued once the AMGA Board has approved the Membership Application

INFORMATION FOR AMGA MEMBER APPLICANTS

Definition of Membership Categories

Member (annual fee - \$100.00 + GST)

- Must be nominated by a Member;
- Is entitled to that number of votes at a general meeting according to spawn usage per week, as confirmed by submission of an annual spawn usage statement to the Company;
- Is entitled to receive notices of general meetings and to attend and be heard at meetings of the Company;
- Is entitled to receive all services available from the Company;
- Is entitled to use the AMGA Logo for professional purposes
- Is entitled to nominate Employee Members; and
- Shall be liable for membership fees as determined by the Board from time to time.

Employee Member (annual fee - \$40.00 + GST)

- Must be nominated by their employer, who is a Member;
- Is not entitled to vote at any general meeting;
- Is entitled to receive notices of general meetings and to attend and be heard at meetings of the Company;
- Is entitled to use the AMGA Logo for professional purposes
- Is entitled to receive journals and newsletters of the company; and
- Shall be liable for membership fees as determined by the Board from time to time.

Associate Member (annual fee - \$100.00 + GST)

- Must be nominated by a Member;
- Is not entitled to vote at any general meeting;
- Is entitled to use the AMGA Logo for professional purposes
- Is entitled to receive notices of general meetings and to attend and be heard at meetings of the Company; and
- Shall be liable for membership fees as determined by the Board from time to time.

Retired Producer Member (annual fee - \$40.00 + GST)

- Must be nominated by a Member;
- Is entitled to use the AMGA Logo for professional purposes
- Is a person who has ceased the business of the commercial production of mushrooms;
- Is approved by the Board and admitted for membership as a Retired Producer Member;
- Is not entitled to vote at any general meeting;
- Is entitled to receive journals and newsletters of the company;
- Is entitled to receive notices of general meetings and to attend and be heard at meetings of the Company; and
- Shall be liable for membership fees as determined by the Board from time to time.

- (a) *I am aware that the Association is substantially financed by a cash contribution calculated on the quantity of spawn sold and/or used, the amount of such contribution being from time to time nominated by the Association. I hereby agree to pay such contribution in the manner required by the Association.*
- (b) *I give my permission for my supplier to release information about my spawn usage to the AMGA Office.*
- (c) *I give my permission for my contact details to be published in the annual Membership Register.*

Name: _____

Signature:

Date: _____

Note: all fees exclude GST