

Home Owners Advisory and Advocacy Service

PO Box 1124 Park Ridge Qld 4125 — Phone:- (07) 3040 2344 — email:- membership@arpq.org.au

We extend you an invitation to join us. “ARPQ” is a non-profit association which is growing rapidly. We have two levels of membership, individual and Association.

We at give you this opportunity to join as a individual member to ensure you will have accurate advice, and a support base when needed.

Membership is open to all homeowners who reside in Residential Parks, throughout Queensland.



YOUR PRIVACY: - Your personal information will be kept confidential, and will only be used by ARPQ Inc. to maintain your membership and provide our Services to you. Personal information will only be disclosed to others if there is an apparent legal requirement to do so.
Your personal information should be kept up to date at all times and you may access, and amend this information upon written request. - please use a membership form marked "UPDATE".
We will not be able to offer you membership if you do not provide the required information.

INDIVIDUAL MEMBERSHIP APPLICATION

Please forward this form to
Membership at ARPQ
PO Box 1124 Park Ridge QLD 4125
membership@arpq.org.au
(07) 3040 2344

Mr Mrs Ms Surname _____

First Name/s _____

Village or Park Name: _____

Village or Park Address _____ Post Code: _____

Site/House Number in Park: _____ Home Phone (____) _____

Street Address (if applicable) _____

_____ P/code _____

Mobile _____ Email: _____

Application by (name): _____

Signature _____ **Amount Paid** _____

Membership Fees — \$15.00 per Member (Person) per year (start 1 Sep.)

Method of Payment: *Cheque Direct deposit Cash* (please circle)

Cheque Payable To: *Associated Residential Parks Queensland Inc*

Bank Account: *(Bendigo) — BSB: 633-000 — Account No: 158853051*

Name: *Associated Residential Parks Queensland Inc.*

Quote Reference: *Your Name (e.g. J. Smith), Site/ House No (e.g. 59) Village/Park Initials (e.g. DTV—Dream Time Village) = Smith59DTV*

Office Use Only:

Received \$ _____ Date: ____ / ____ / ____ Receipt Number _____ Member No: _____