



Home Owners Advisory and Advocacy Service

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

ASSOCIATION MEMBERSHIP APPLICATION

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

Association Details:

Association Name: _____

Village or Park Address _____

_____ Post Code: _____

Contact Person: _____

Position: _____

Site/Villa Number _____ Email: _____

Home Phone: _____ Mobile: _____

Committee Members:

President: _____ Contact No _____

Secretary: _____ Contact No: _____

Treasurer: _____ Contact No: _____

Number of Members in your Association: _____

It is the responsibility of the Association to advise ARPQ Inc. of any changes to their Committee

Association membership fee — \$75 per annum (1 October to 30 September)

Payment Details:

Amount Paid \$ _____ Application By (Name):- _____

Signature:- _____ Date: ___ / ___ / ___

Method of Payment: Cheque Direct Deposit Other _____ (please circle)

Cheque payable to: Associated Residential Parks Queensland Inc

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

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.

Office Use Only:

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