



BRONZE MEMBER

Applicants Name _____

- BRONZE** Membership: **\$33.00** p.a. Outside Mission Beach operators only.
- I understand if my account is past 60 days overdue my membership will be suspended.
- I agree to abide by the Mission Beach Tourism 'Code of Best Practice' and conditions of membership.
- I agree to receiving communication by email periodically.

Signature: _____ **Date:** _____

Payment Method:
Direct Debit
 Mission Beach Tourism Inc.
 BSB 654019 A/C 100046837 Amount: _____ Date: _____

Cheque (Payable to: Mission Beach Tourism) Amount: _____

Credit Card **Visa** **MasterCard** CVV: _____ Amount: _____

Card Number: Expiry Date: /

Company Name: _____

Cardholders Name: _____

Cardholders Signature: _____

Please return completed application form to Mission Beach Business & Tourism
(Office use only):

Approved: _____ Date: _____



MISSION BEACH
BUSINESS & TOURISM

MEMBERSHIPS 2016/2017

LEGAL ENTITY NAME:

TRADING NAME:

ABN:

Contact Details:

Main Contact:

Physical Address:

Suburb: _____

State: _____ Postcode: _____

Postal Address:

Suburb: _____

State: _____ Postcode: _____

Phone: _____ Mobile: _____

Email: _____

Website: _____

Financial Accounts Contact Person:

Email: _____