



...the key ingredient.

PO Box 4062
 Bateau Bay NSW 2261
 Tel 0422 087 488
 Fax 02 4334 1114
melindafia@dodo.com.au

MEMBERSHIP APPLICATION

(PLEASE PRINT)

COMPANY NAME			
TRADING NAME			
TRADING ADDRESS			POST CODE
POSTAL ADDRESS			POST CODE
NOMINATED ASSOCIATION REPRESENTATIVE			
JOB TITLE			

PHONE		FAX		MOBILE	
EMAIL			WEB		

ABN No		NSW HEALTH FOOD BUSINESS NOTIFICATION No	
HACCP CERTIFICATE No			

INDUSTRY CATEGORY <small>number in order of importance of operation in box next to category</small>				
MANUFACTURER		BROKER		IMPORTER
				AGENCY
OTHER <small>PLEASE DESCRIBE</small>				

PRODUCT CATEGORY <small>indicate with X in box next to category</small>				
FOOD		BEVERAGE		PAPER
				EQUIPMENT
OTHER <small>PLEASE DESCRIBE</small>				

NAMES OF COMPANIES & BRANDS REPRESENTED				

PLEASE ATTACH A LIST SHOWING DETAILS OF PRODUCTS MARKETED TOGETHER WITH LITERATURE ETC AND A BRIEF COMPANY HISTORY.

COMPANY MANAGEMENT			
APPLICANTS NAME			
POSITION			
SIGNED		DATE	

PLEASE NOTE: DO NOT INCLUDE ANY PAYMENT WITH THIS FORM.
 A TAX INVOICE WILL BE FORWARDED AFTER THE APPLICATION HAS BEEN PROCESSED.