## **DESTINATION PORT STEPHENS MEMBERSHIP APPLICATION**

ABN 96 080 458 733 ACN 080 458 733

1st July 2020 - 30th June 2021

Full Membership - \$200.00 +GST

\*All details must be completed

**Applicant Business Information** 

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*APPLICANT NAME (A) – FIRST NAME	ACCOMMODATION
SURNAME	BED & BREAKFAST
	BACKPACKERS
COMPANY NAME	
	SERVICED APARTMENTS
	LETTING AGENTS/REAL ESTATE
ABN	
*TRADING NAME	UNIT OWNERS/SELF MANAGED 
*ARE YOU REGISTERED FOR GST? YES NO	WATERFRONT
*DUGNIESS ADDDESS	CRUISE/FISHING OPERATORS
*BUSINESS ADDRESS	- MARINAS
	_ OTHER WATER BASED ACTIVITIES
TOWN/SUBURB POSTCODE	LAND TOUR OPERATORS
*CONTACT - PHONE	
MOBILE	RESTAURANTS / CAFÉS / COFFEE SHOPS
PHONE / PERSONAL (for DPS use only)	_
*EMAIL	_ ATTRACTIONS
WEB	LARGE
DESCRIPTION OF YOUR BUSINESS	SMALL
DESCRIPTION OF TOOK BOSINESS	
	SMALL (UP TO 5 EMPLOYEES)
	BUSINESS (OVER 5 EMPLOYEES)
	SHOPPING CENTRES/AIRPORTS (MGT)
*POSTAL ADDRESS AS ABOVE	CLUBS/HOTELS/TAVERNS
	_
TOWN/SUBURBPOSTCODE	- Email Correspondence
DELEGATE NAME (B) (for voting) SAME AS APPLICANT	
FIRST NAME	Please provide additional staff member email addresses to receive member updates, newsletters etc.
SURNAME	_
ACCOUNTS EMAIL AS ABOVE	
MARKETING NAME (C) DELEGATE APPLICANT	_
FIRST NAME	Destination
SURNAME	Destination PORT STEPHENS
PHONE/MOBILE	POKISIEFHENS

(A) Person who is the legal member.

(B) Person who is eligible to vote.

EMAIL \_

(C) Person who is the contact for marketing, communications, newsletters etc.

## Membership Fee Payment Options

I have read and agree to abide by the Membership Terms and Conditions

Destination Port Stephens accepts payment in the form of cash, cheque, money order and electronic funds transfers. We also accept MasterCard and Visa (credit card surchage applies). Tax invoice will be sent upon receiving application form.

## Membership Acceptance

NAME
SIGNATURE
DATE
PRIVACY STATEMENT – PLEASE READ CAREFULLY
Destination Port Stephens maintains a database of its members for the purpose of regular communication on industry matters. I acknowledge that limited details such as business name, marketer name, address, main phone number and email address will be available to people engaged in marketing initiatives with Destination Port Stephens as is necessary and to other financial members of Destination Port Stephens.
NAME
SIGNATURE

## TERMS & CONDITIONS

DATE -

In making this application for membership it is acknowledged that:

- 1. Applicant must be a legal entity in accordance with the Articles of Association Section 2 (d).
- 2. Membership category is the category for which the member can stand for election
- 3. Categories need to be endorsed by the Board before being accepted.
- 4. Email address is where notices are served and where newsletters/updates are sent.
- 5. All relevant approvals, licenses from Local, State or Federal Authorities have been obtained to allow me to operate the business associated with this application.
- 6. Privacy statement must be completed and signed before membership can be accepted.
- 7. This membership is for Port Stephens Tourism Limitied trading as Destination Port Stephens. Any rights or benefits relating to any Visitors Centre are subject to agreements prevailing at any given time.
- 8. New and renewing memberships are subject to Board approval. The Board is not required to supply a reason for acceptance or rejection of any membership.
- 9. Members agree to abide by all provisions in the Memorandum and Articles of Association, a copy of which is available for viewing at the Office of Destination Port Stephens (by appointment) or download from www.portstephenstourism.com.au

OFFICE USE C	DNLY				
DATE JOINED		DATE PAID		INVOIC	E NO
ACCOUNT N	JMBER				
XERO	BOOKEASY	DPS MEMBER WEBSITE	CAPSULE	MAILCHIMP	WELCOME PACK