

Australian Landfill Owners Association Ltd Associate Membership Application – 2020

Associate Membership allows landfill owners with landfill less than 15,000 tonnes of waste per annum to join ALOA. Refer Associate Member Policies and Procedures for details on membership rights and benefits

Please complete this form for membership.								
Entity Name								
Postal Address								
City		State		Postcode				
Phone		Fax		Website				
Quantity of Landfil	Il received per annum:		tonnes					
PRIMARY MEMBEI	RSHIP CONTACT (for mer	mbership, billi	ing and other information)	- required				
Title	First Name		Surname					
Position								
Postal Address								
City		State		Postcode				
Phone		Fax	Мо	obile				
Email								
OWNER / CEO - re	quired							
Title	First Name		Surname					
Position								
Postal Address								
City		State		Postcode				
Phone		Fax	Мо	bbile				
Email								



Signature

	Owners Association							
Please list ALL Landfill sites for your Entity:								
1	Site Address:	City:	State: P/0					
_	Contact Name	City.	State. 170	1				
	Phone	Email						
2	Site Address:	City:	State: P/0					
_	Contact Name	City.	State. 170	1				
	Phone	Email						
3	Site Address:	City:	State: P/0					
	Contact Name		,	1				
	Phone	Email						
PAY	MENT DETAILS							
Mei	mbership fees for 2020 are as follows:		Payments:					
Landfill Received Per Annum		Membership Per Annum	Tayments.					
Less than 15,000 tonnes		(INC GST)	Electronic Payments:					
		\$ 561	Australian Landfill Owners Association					
	,		Account Number: 316295 BSB: 033 146					
			_					
Am	ount: (INC GST) \$		Pay <u>Pal</u>					
	VACY DECLARATION							
	OA acknowledges and respects the priva		=					
purpose of processing your registration or inquiry, keeping you informed of information and assisting us provide information to								
you. The intended recipient of the information is ALOA. You have the right to have access to, and alteration of personal information concerning you in accordance with the Act and ALOA's Code of Practice.								
IIIIC	initiation concerning you in accordance	with the Act and ALOA's code of F	ractice.					
TER	MS AND CONDITIONS							
1.		· · · · · · · · · · · · · · · · · · ·	e terms and conditions applicable to Ass					
	membership of ALOA. Those terms and condition are set out in full on the internet at www.aloa.com.au and may be							
	altered from time to time.							
2.	ALOA Associate membership is subject	=						
3.	3. Associate Membership of ALOA is for a period of 12 months starting from January 1, 2020. Membership fees are payable							
4	and not refundable. To cancel or resign your membership, you must provide notice in writing.							
4.	4. Associate Membership services and information may be suspended if you do not pay your membership renewal fees in a							
5.	timely manner. 5. Associate Membership services and information may vary from time to time. ALOA cannot guarantee that services offered							
٥.	at the time of joining or renewal will continue for the whole period that you are a member.							
6.								
-	,		,					
DEC	DECLARATION (to be completed by Primary Membership Contact)							
I ag	I agree to ALOA's terms and conditions of Membership (please tick) □							
I (please print name)								
امم	Hereby apply for membership of ALOA							
1161	eby apply for inclinationing of ALOA							

Date