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## CHANGE OF MEMBERSHIP DETAILS

MEMBER IDENT: \_\_\_\_\_

I WISH TO CHANGE: (please circle)

Type Trading Name Nominee Address Phone Fax Mobile Email

*Membership type is if you wish to upgrade or downgrade your membership, eg. upgrade from Commercial (C) to Full (F).*

**PREVIOUS DETAILS:** *(This section must be completed)*

Type: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Nominee: \_\_\_\_\_

Address (postal): \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

**NEW DETAILS:** *(Ensure you have completed the above section advising of previous details before advising new details)* Type: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Nominee: \_\_\_\_\_

Address (postal): \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

SIGNATURE OF CURRENT NOMINEE: \_\_\_\_\_

SIGNATURE OF NEW NOMINEE (if changing nominee): \_\_\_\_\_

**Please note that the nominee is the person recorded by the Society as the nominee- representative of the membership AND is the person eligible to vote for the membership.**

PLEASE NOTE: That this document must be signed only by the Authorised Representative on the membership being changed. If this document is being signed by anyone other than the Authorised Representative it will be returned and no changes will be made until correct signature can be provided.