

## FULL / ASSOCIATE MEMBERSHIP APPLICATION FORM

Yes, I wish to be	ecome / renew full membership of th	ne Association
Yes, I wish to be	ecome / renew associate membership	of the Association
Name:		
Organisation:		
Postal Address:		
Phone:	Fax:	
Email:		_
1. Do you have a cellar door operati	ion?	YES / NO
2. Do you own a vineyard?		YES / NO
2a. If NO to Question 2 a	bove, do you plan to plant a vineyard	in the near future? YES / NO
2b. If YES to Question 2 a	above,	
Current area und	er vine:	Hectares / Acres
Varieties planted:		

Types of memberships available:

- Full member (\$200 per year) members with a winery or vineyard of no designated size and hold a license to sell wine. Full members have full voting rights.
- Associate member (\$20 per year)- members in other associated industries or an individual that has a vineyard but does not hold a license. Associate members have no voting rights.

Note(s): Invoices will be emailed out on receipt of application form. Membership to the Association is for the calendar year.