

PORT MACQUARIE MEALS SERVICE Inc

Corporate Membership Application Form

Name of Company / Organisation: _____

Postal Address: _____

Primary Contact

Name: _____

Position: _____

Office Phone: _____ Mobile: _____

Email: _____

Preferred Membership Contribution (Refer Corporate Membership Guidelines)

- Support for staff to undertake volunteer work with paid time
- Payment of annual corporate membership fee (currently \$100)
- Other contribution – to be negotiated with the Manager of Port Macquarie Meals Service Inc.

If choice is to pay the annual corporate membership fee, please indicate preferred method of payment.

Authorisation – including permission to display the company logo on the Port Macquarie Meals Service Inc website YES / NO

Signed by: _____ Date: _____

Name: _____

Position / Title: _____

Please email application form to – portmow@bigpond.net.au or post to - Port Macquarie Meals Service Inc, 33/7 Garden Crescent Port Macquarie, NSW 2444