# Biochar Network of Western Australia Inc

**Postal Address: c/- Warren Catchments Council, 52 Bath St, Manjimup WA 6258**

# Membership Application Form

**First Name:** ……..

**Surname:** ……

**Address:** ……..

**Town:** …… **Postcode:** ……..

**Postal Address if Different to above:** .……

**Preferred Contact Number:** ……..

**Email Address (for correspondence):** ……

**Your Biochar Industry involvement:**

☐ **Commercial Producer** ☐ **Small Scale User-Producer** ☐ **Research** ☐ **Agricultural Sector**

**Membership fee 2017/18 Financial Year:** **$50**

**Signature:** …… **Date:** ……..

**<u>Bank Details for Direct Debit:</u>**

**A/c Name: Biochar Network of WA**

**BSB: 633-000** **Account number: 160367587** *Please include your name in the Narration*

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**Office Use:**

**Method of Payment:** Cheque – Direct Debit – Cash

**Date Recorded on Register:** ……

**Information Package Sent:** ……

**Date Membership Ceased:** ……