



New Membership/ Renewal form

ABN 18 807 187 154

Name:.....

Address:..... Postcode:

Phone:

Email:

Signed: Date:

1. **New Membership \$1 for 1 Share plus \$15 annual subscription**
(requires completion of details and signature overleaf)

OR

2. **Renewal membership \$15 for 2017-2018**

\$15 2018 – 2019

(tick either or both)

YES I would like to become a volunteer for the EICo-op.

My skills and resources available include:

.....
.....

Payment methods:

Direct deposit:

BENDIGO BANK
BSB: 633-000
Account no: 137757159

Code deposit with your initial, surname & m'ship year eg JSmith2018 & email details as per below

Receipt No:.....

After you have made a direct deposit please email info@eico-op.com.au with the receipt number, your full name, phone, address and year/s the membership is for. (Active memberships are on financial year basis)

Or make cheque out to:

Energy Innovation Co-Op LTD

POSTAL ADDRESS for completed membership/ share forms:

Energy Innovation Co-Op
PO Box 111 Inverloch Vic 3996

OR

Email: info@eico-op.com.au mark as "attention: memberships"

Or Please post completed & signed new membership forms and be sure to include your direct deposit receipt number in space provided.



APPLICATION FOR NEW SHARE (new members)

Name of Co-operative: Energy Innovation Co-operative Ltd abn 18 807187 154

I.....

(Full name of applicant) hereby apply to be allotted 1 initial share in the abovenamed co-operative

In respect of such application I undertake to pay the sum of \$16 which is made up as follows:

- 1 X \$1 initial (voting) share PLUS
- \$15 (as at Nov 2017) annual subscription.

Please tick all relevant boxes:

I am over the age of 18 years

I am under the age of 18 years having been born on . / /.....(dd/mm/yyyy)

I am a new member of the Energy Innovation Co-operative and have signed the declaration below

(please complete form overleaf as well)

I.....(full name and address) agree that if this application is approved and the share as aforesaid are allotted to me, I will pay the share capital amount (\$1) in accordance with the Co-operatives national Law Application Act 2013 (Victoria) and I agree to be bound by the rules of the Co-operative and by any alterations thereof registered in accordance with the Co-operatives National Law Application Act 2013.

Signature of Applicant:-----Date

Signature of Witness:-----Date

Name of Witness (please print):.....