



Vending excellence through support and education

Application for Membership 2016/2017

Business Name: _____

Business Address: _____

_____ Post Code: _____

Contact Name: _____

Telephone: _____ Mobile: _____

Email: _____

Website: _____

Which of the following Vending Machine activities are you engaged in?

- Drink Vending Snack Vending Coffee Vending Cigarette Vending
- Manufacturer / Distributor of Products and / or Services for use by the Vending Industry Manufacturer / Distributor of Vending Machines and / or Component Parts or Accessories
- Other (Please Specify): _____

Provision of services to the Vending Industry.
i.e. – Insurance, Machine repairs, etc. (Description): _____

I / we hereby apply for membership of the NVA, and undertake that I / we will if elected, abide by the constitution of the Association, and any Code of Conduct and Resolutions that may be approved by the membership in General Meeting.

Subscription fee for year July 2016 to June 2017

- O** – Operator of vending machines \$330.00 (GST Incl.)
- N** – National Member \$550.00 (GST Incl.)
- L** – Local Supplier \$440.00 (GST Incl.)
- C** – Country Membership \$110.00 (GST Incl.)

Proposed By _____

Applicants Signature _____ Date of Application _____

Office use only

Date application received _____ Date Membership Approved _____

Type of Membership _____ Membership Fee _____

Please return completed application form with fee to the NVA Secretary:

If paying directly into the account, please advise us when you email and / or send in your application

Bank Details:

Account Name: National Vending Association

BSB: 063-239

Account Number: 10412860

PO Box 3169 WHEELERS HILL VIC 3150

Phone – 0428 525 314

Email – Secretary@NationalVendingAssociation.com.au

Website – www.nationalvendingassociation.com.au