



CO-OPS NSW

APPLICATION FOR MEMBERSHIP
CO-OPERATIVE FEDERATION OF N.S.W. LIMITED
(A non-profit co-operative without share capital)

Name of Applicant: _____
(Name of Co-operative/body corporate)

Postal Address: _____
(Address to which correspondence is to be sent)

Street Address: _____
(Actual location)

Phone: () _____ **Facsimile:** () _____ **Email:** _____

Has the applicant co-operative/body corporate been in existence for less than twelve (12) months?

YES Go to primary activity
NO

Turnover for last trading/financial year: 20____/20____ \$ _____

Is the Co-operative/body corporate

TRADING NON TRADING

Primary Activity: _____

If insufficient space, please attach separate statement

Nominated Representative of Applicant: * _____

Phone: (w) () _____ (h) () _____ Facsimile: () _____

Mobile: _____ Email: _____

Relationship to Applicant: _____
(Member/Director/CEO/Secretary/Other – please specify)

I have been advised that copies of the Rules of the Co-operative Federation of NSW Limited, all special resolutions passed by members (other than those altering the Rules) and the most recent annual report are available for inspection at the Federation’s registered office.

I hereby apply, on behalf of the applicant named above, for it to be admitted as a member of the Co-operative Federation of NSW Limited.

If this application is approved, I agree, on behalf of the applicant, that it will pay all fees required by the co-operative, and I agree, on behalf of the applicant, that it shall be bound by the Rules of the co-operative and by any alterations thereof registered in accordance with the Co-operatives (Adoption of National Law) Act 2012. I also agree that the contact details of the applicant may be circulated to all other members of the Federation to assist with networking amongst co-operatives.

I am over the age of eighteen (18) years.

Dated this _____ day of _____, 20____

(Signature of Applicant’s appointed Representative)

(Witness Name)

(Signature of Witness)

*** Please attach to this application the form “Notification of Appointment of Person to Represent a Body Corporate’s Membership of the Co-operative Federation of NSW Ltd”**

Please complete both pages of the application and forward, together with your annual fee, to Co-ops NSW, GPO Box 1064, NSW 2001. A tax invoice/receipt will be issued after this application has been considered by the Board and the applicant has been accepted as a member. For all enquiries please call Secretary Sam Byrne on 0408 231 509 or email him at sec@nsw.coop.

**NOTIFICATION OF APPOINTMENT OF PERSON TO REPRESENT A BODY CORPORATE'S
MEMBERSHIP OF THE CO-OPERATIVE FEDERATION OF NSW LIMITED**

We, * _____ and * _____
(Name of Director 1) *(Name of Director 2)*

As Directors of _____
(Name of co-operative/body corporate)

Advise that _____ has been appointed by the Board on
(Full name of person)
_____/_____/_____ to represent this co-operative/body corporate in respect of its membership of the
Co-operative Federation of NSW Limited.

Place seal of
body corporate
here

(Signature of Director 1)

_____/_____/_____
(Date)

(Signature of Director 2)

_____/_____/_____
(Date)

* **NOT** being the appointed representative

DECLARATION OF APPOINTED REPRESENTATIVE

I, _____ declare that I am not currently nor will I accept to be appointed to
represent another co-operative/body corporate member of the Co-operative Federation of NSW
Limited whilst I am the appointed representative of

(Name of co-operative/body corporate)

to the Co-operative Federation of NSW Limited.

(Signature of Appointee)

_____/_____/_____
(Date)



CO-OPS NSW