

1. Personal Details

MEMBER 1

Mr Mrs Ms Miss Dr Other Date of birth DD / MM / YYYY

Given Name/s

Surname

Occupation

Phone (AH) Phone (BH)

Phone (M) Email

MEMBER 2

Mr Mrs Ms Miss Dr Other Date of birth DD / MM / YYYY

Given Name/s

Surname

Occupation

Phone (AH) Phone (BH)

Phone (M) Email

Residential Address (must be as on Electoral Roll)

P/Code

Postal Address

P/Code

2. Membership Options

Membership type and joining fees (please tick category)

MEMBERSHIP TYPE	BRONZE	SILVER	GOLD	PLATINUM
Ordinary Single	<input type="checkbox"/> \$110	<input type="checkbox"/> \$280	<input type="checkbox"/> \$550	<input type="checkbox"/> \$1,300
Ordinary Dual	<input type="checkbox"/> \$170	<input type="checkbox"/> \$400	<input type="checkbox"/> \$900	<input type="checkbox"/> \$2,000
Concessional Single*	<input type="checkbox"/> \$45			
Concessional Dual*	<input type="checkbox"/> \$65			
Membership for Life Single**	<input type="checkbox"/> \$2,000			
Membership for Life Dual**	<input type="checkbox"/> \$3,000			

NOTE: the LNP reserves the right to not accept an application. Prices are an annual fee, include GST and are valid as at October 2013. Prices subject to change without notice.

* Concession rate of membership is defined as people under 31 years of age and pensioners.

** One off payment

3. Additional Membership Options

- LNP Women** – Yes, I would also like to join the LNP Women.
- Young LNP** – Yes, I am between 16 - 31 years and would also like to join the YLNP.

NOTE: you must be a financial member of the LNP to exercise these voluntary membership options.

4. Name Badge

- Name badge** – Additional cost \$10 each.

Specify preferred name on badge

5. Branch Allocation

Please nominate your Branch of preference below.

- No preference, please allocate me to a Branch.
- Yes, I prefer the following Branch

6. Membership Questionnaire

What is your area of expertise, qualifications and/or skills?

What are your policy interests?

Are there any specific aspects of the party that you would like to be involved in?

7. Payment Options

- Direct Debit (option A) Cheque (option B) Credit Card (option C)

OPTION A DIRECT DEBIT AUTHORITY

Date of Application

I/We (Surname)

Given Names

Request you, until further notice in writing, to annually debit my/our account described in the Schedule below the appropriate fee which the LNP may debit or charge to me/us through the Direct Debit System. (Terms and Conditions on reverse page)

The Schedule - Details of account to be debited

Name on account

Bank BSB:

Account Number

Bank Location

SIGNATURE:

OPTION B PAYMENT BY CHEQUE

- My cheque/money order made payable to the LNP is enclosed.

OPTION C CREDIT CARD

- Please charge my credit card \$

CARD TYPE Visa Mastercard

/ /

Expiry Date DD / MM / YYYY

Name on Card

CARDHOLDER'S SIGNATURE :

8. Declaration

Do you believe in the values of the Liberal National Party – individual dignity, liberty, free enterprise, the family and personal and community responsibility? Yes No

Have you ever been a member of either the: LNP Liberal Party The Nationals

Have you ever been a member of any other political party? Yes No
(if Yes, which party?)

Have you ever applied for, and been refused membership of the LNP, Liberal Party or The Nationals? Yes No

Have you ever been expelled from either the: LNP Liberal Party The Nationals

Have you ever nominated as a candidate in an election where the LNP has had an endorsed candidate? Yes No

(if Yes, provide details?)

9. Application

I/We apply for membership of the Liberal National Party of Queensland and agree to be subject to the Party's Constitution and rules of the Party.

SIGNATURE
MEMBER 1

SIGNATURE
MEMBER 2