



Membership Application/Renewal form

Energy Innovation Co-operative Ltd.
ABN 18 807 187 154 PO Box 111 Inverloch Vic 3996

Please consider initiating a new membership or membership renewal via
<https://energy-innovation.au/joinus>

This will greatly assist us to manage membership and contact details securely

Please note: a signed hard copy of this form is also required for new memberships. (Scanned copy via email OK)

Name:

For Applicant under 18 years enter
Parent/Guardian First & Last names on
a/c of Under-18 yo First & Last Names

.....

Address:

Postcode:

.....

Phone: Email:

Signed: Date:

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

Application initiated online? (Preferred) Y/N

(New members: please also complete form overleaf)

2. **RENEWAL membership:** Please see preferred procedure using online link (above) to initiate membership renewal instead of this form

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

My skills and resources available include: *(Or send email to hello@energy-innovation.au)*.....

.....

Payment Methods (After providing required information above or via online link):

<p>Direct deposit (preferred): BENDIGO BANK BSB: 633-000 Account no: 137757159</p> <p><i>Reference the deposit with your surname & initial & Memb</i> e.g. SmithA Memb</p> <p><i>Deposit Receipt/Ref:</i> <i>(See example above)</i></p>	OR	<p>By cheque payable to: Energy Innovation Co-Op Ltd</p> <p>POSTAL ADDRESS for completed membership/ share forms or payments by check: Energy Innovation Co-Op Ltd PO Box 111, Inverloch, VIC 3996</p> <p>OR membership forms (renewals only): via Email to: hello@energy-innovation.au</p>
---	----	--

For new memberships and renewals NOT initiated online, after you have made a bank direct deposit, please either (a) email a scanned copy of this form to hello@energy-innovation.au or (b) send a message that includes your name, phone number, mailing address, the bank receipt/reference number to the same email address.

Where applicable please post completed & signed membership forms to the above address.

Please be sure to include your direct deposit reference in the space provided to help identify your payment.



APPLICATION FOR NEW SHARE (new members only)

Name of Co-operative: Energy Innovation Co-operative Ltd ABN 18807 154

I.....

(Full name of applicant) hereby apply to be allotted 1 initial share in the above-named 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 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)
(Requires signature of parent or guardian below)

I am a new member of the Energy Innovation Co-operative
and have signed the declaration below
(New members: please also complete form overleaf)

I, _____ (full name & 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:
or Parent/Guardian of
under-18 y.o. Applicant

Date

Name of Witness:
(please print)
