



The Landscape Contractors' Association of NSW & ACT Ltd

ACN 002 644 920 ABN 37 116 532 957

8 French Avenue BANKSTOWN NSW 2200

P O Box 1226 BANKSTOWN NSW 1885

9790 5151 9796 2726

lca@lcansw.com.au

APPLICATION FOR STUDENT MEMBERSHIP

Fees

Student Membership – 2009 Annual Fee
(Includes Application Fee of \$5.00)

\$65.00

Notes:

- Student Membership will be considered once only, and will only be considered if the Applicant is undertaking a recognised and approved course in the landscape field of study.
- The term of Student Membership is for two (2) years only (through LCA's financial year).
- Fees quoted are GST inclusive and subject to annual review.
- The LCA Financial year is from 1 January to 31 December.
- Membership fee is payable annually from the date approval is granted and the amount payable will be invoiced with a letter of approval, if granted.
- Application Fee of \$5.00 is included in the \$65.00 non-refundable Membership Fee payable by any method shown below. Incomplete details may delay processing of this application.
- Completed application should be mailed to the P O address shown above.

METHOD OF PAYMENT

Please ✓ as appropriate

DIRECT CREDIT in favour of "LCA of NSW" for \$65.00 to **NAB Account No 506 193 735 BSB 082 124**

Deposited on (date) _____

OR

Please charge \$65.00 to my: Bankcard Mastercard Visa

Card Number: _____ / _____ / _____ / _____ Expiry: ____ / ____

Cardholder's Name: _____

Cardholder's Signature: _____

OR

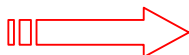
Cheque payable to "LCA of NSW" for \$65.00 is enclosed.



BENEFITS OF STUDENT MEMBERSHIP

- ◆ LCA's print material (where available)
- ◆ The LCA Newsletter (monthly)
- ◆ Eligibility to attend the LCA General Meetings
- ◆ Opportunity to attend the LCA NSW Awards of Excellence

Office Use STUDENT MEMBER No. _____ Approved _____
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Please attach a photocopy of your Student ID Card

Please *PRINT*

Student Name _____	Date of Birth _____
Postal Address _____	Suburb _____ State _____ Postcode _____
Telephone _____	Mobile _____
Fax _____	Email _____

I make application for Student Membership of The Landscape Contractors' Association of New South Wales & ACT Limited (hereinafter LCA of NSW & ACT Ltd) and, if accepted, agree to be bound by the Constitution and, Rules and By-Laws made thereafter and to adhere to the Code of Ethics. It is noted that the LCA of NSW & ACT's authorised representative/s may make any relevant enquiries, which will assist its deliberation, and consideration of this application.

COURSE DETAILS

1. a) Name of Institution where Course is being studied: _____		_____	Business Hours No. _____
b) Course Name _____		c) Course No. _____	
d) Student No. _____	e) Course Commencement Date _____	f) Anticipated Completion Date _____	

2. The following two Full (financial) Members have been contacted and agreed to support this Application.

Proposer _____		_____
Company _____		
Secunder _____		_____
Company _____		

3. What do you hope Membership if granted, will help you to achieve?

4. How did you hear of the LCA of NSW?

5. DECLARATION

I affix my signature and declare that the information supplied and attached, is true and correct.

Signature of Applicant _____ Date _____