APPLICATION FOR MEMBERSHIP 2024

Membership period: 1 January 2024 - 31 December 2024

MEMBERSHIP TYPE (Please tick one)

Corporate - for public or private companies

Government – for local, state or federal governments

Please Note: Individual and Student memberships can be completed online at: wmrr.asn.au/web/join_wmrr/become_a_member.aspx



WMRR NATIONAL OFFICE

57 St Johns Road Glebe NSW 2037 (02) 8746 5000 ABN 78 071 897 848 info@wmrr.asn.au | www.wmrr.asn.au

ORGANISATION CONTACT DETAILS

Organisation:			
ABN:			
Street/Postal Address:			
Suburb/City:			
Country (If outside Australia):	State:	Postcode:	
Phone:			

COMPANY ADMINISTRATORS

The Company Administrator is the primary contact for your organisation and is in charge of managing the organisation's profile, member information, and membership renewals. They also have the capability to register their organisation's staff to any of our events on their behalf. The Company Administrator can be a member, but it is not mandatory.

Company Admin 1:		
Name:	Position:	
Email:	Phone:	
Company Admin 2 (optional):		
Name:	Position:	
Email:	Phone:	

WHAT TYPE OF ORGANISATION ARE YOU? (Please select ONE only)			
Academia / Research	Equipment Supplier	🗆 Manufacturer / Generator 📋 Remanufacturing	

- □ Construction & Demolition □ Federal Government
- □ Collection / Transport
- □ Commercial & Industrial
- □ Landfill
- Recycling
- Professional Services

Hazardous Waste

□ Industry Body

- □ Other (please specify):
- Multiple Services
- □ MSW
 - □ Organics / Composting
 - Energy from Waste
- Resource Recovery
- □ State Government
- □ Education / Training
- Local Government

WHAT IS THE SIZE OF YOUR ORGANISATION (II	E NO. OF PEOPLE)?
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WHAT YEAR WAS YOUR ORGANISATION FOUNDED?

HOW DID YOU HEAR ABOUT WMRR?

D MEMBERSHIP TYPE E only. All amounts quo	ted are annual fees and in <i>i</i>	Australian dollars (including	g GST).
Corporation 1/ Government 1	Corporation 2/ Government 2	Corporation 3/ Government 3	Corporation 4/ Government 4
\$563 Includes 1 Member Affiliate	\$1,866 includes up to 4 Member Affiliates	\$10,327 includes up to 26 Member Affiliate	\$17,080 includes up to 51 Member Affiliates
\$373 (pp) for up to 2 Additional Affiliates	\$373 (pp) for up to 21 Additional Affiliates	\$373 (pp) for up to 24 Additional Affiliates	\$373 (pp) for unlimited Additional Affiliates
al ed:			
	e an invoice or pay by card		
Card			
Visa A	Amex		
		Expiry Date:	CCV:
ame:			
gnature:			
	E only. All amounts quo Corporation 1/ Government 1 \$563 Includes I Member Affiliate \$373 (pp) for up to 2 Additional Affiliates al ed: DD you would like to receiv nds Transfer Card Visa ame: gnature:	E only. All amounts quoted are annual fees and in / Corporation 1/ Government 1 \$563 Includes 1 Member Affiliate \$373 (pp) for up to 2 Additional Affiliates al ed:	E only. All amounts quoted are annual fees and in Australian dollars (including Corporation 1/ Government 1 \$563 Includes 1 Member Affiliate \$373 (pp) for up to 2 Additional Affiliates al ed: COD you would like to receive an invoice or pay by card. Card Visa Amex Expiry Date:

- Once payment has been received you will receive a welcome email from us that will signal your membership activation.
- In the case you do not already have existing login details, these will be included in the welcome email also. You can access your account through our website <u>www.wmrr.asn.au</u>
- The welcome email will also include a link to our Working Groups application form where you can choose to opt into our many Working Groups.
- WMRR Membership runs from 1 January to 31 December each year. Applications made at any time throughout the year are charged at the full annual rate, unless otherwise specified.
- We collect and manage personal information in accordance with the Australian Privacy Principles (APPs) and other requirements of the Privacy Act 1988.
- Each tier of membership consists of certain Member Affiliate(s) included in the membership with the option of including Additional Affiliates (additional members). Please complete the form/s below (pages 3 and/or 4) for each Member Affiliate and Additional Affiliate to be included in your membership.
- If you'd like help completing your application, please contact the WMRR National Office on (02) 8746 5000 or email us at info@wmrr.asn.au
- Send all completed forms to info@wmrr.asn.au

MEMBER DETAILS

Must be completed for each Member Affiliate and each Addtional Affiliate (refer to page 2 for inclusions)

CONTACT DET	AILS		Member Affiliate
Prefix:	First Name:	Surname:	
Position:			
Street Address			
Suburb/City:	o page 1):	State:	Postcode:
Country (If out	tside Australia):	State	Postcoder
Mobile Phone	plete only if not in AUSTRALIA):	Work Phone:	
Email:	55:		
(if different t	o page 1):		
DECLARATION			

I hereby make application for Membership of the Waste Management and Resource Recovery Association of Australia (WMRR) on behalf of my organisation and, if accepted, agree to be bound by the Constitution, Rules and By-Laws made thereafter, and to adhere to the Code of Conduct. For more information go to www.wmrr.asn.au

Full Name:	f manage personal information in accordance with the Australian Privacy Principles (APPs)	and other requirements of the Privacy Act 1988.
- Signature:		Date:

CONTACT DET	AILS	Member Affiliate	Additional Affiliate
Prefix:	First Name:	Surname:	
Position:			
Street Addres	S:		
Suburb/City:		State:	Postcode:
Country (If ou	tside Australia):		
Mobile Phone		Work Phone:	
Email:			

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Full Name:	Date:
Full Name:	_
Signature:	Date:

MEMBER DETAILS

Must be completed for each Member Affiliate and each Additional Affiliate (refer to page 2 for inclusions)

CONTACT DETA	ILS	Member Affiliate	Additional Affiliate
Prefix:	First Name:	Surname:	
Position:			
Street Address:	·		
Suburb/City:	page 1):	State:	Postcode:
Country (If out	side Australia):	State	Postcode:
Mobile Phone:	plete only if not in AUSTRALIA):	Work Phone:	
Email:	s: page 1):		

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- Signature:		Date:

CONTACT DET	AILS	Member Affiliate	Additional Affiliate
Prefix:	First Name:	Surname:	
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Street Addres	s:		
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Full Name:	Date.
Signature:	Date:

PLEASE COPY/REPRINT THIS PAGE AND ATTACH FOR EACH ADDITIONAL MEMBER YOU WOULD LIKE TO ADD