



**CAPE YORK PENINSULA DEVELOPMENT ASSOCIATION INC.**

PO Box 646N Cairns QLD 4870  
207 Bunda Street Cairns QLD 4870

Phone: (07) 4031 3432  
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Email: cypda@cypda.com.au

# Membership Application Form

Name of applicant \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Postal Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

I would prefer to receive information by      MAIL       EMAIL       FAX

I would like to receive      CYPDA Quarterly Newsletter       Minutes

Industry/groups represented      Indigenous       Community       Tourism

   Pastoral       Mining       Environment

   Forestry       Fishing       Other

### Application Declaration

I confirm that the information provided in this application is true and correct and agree to abide by the CYPDA charter

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Nominators

Proposer \_\_\_\_\_ Signature \_\_\_\_\_

Seconder \_\_\_\_\_ Signature \_\_\_\_\_

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**Membership Fees      Personal    \$25.00      Corporate    \$150.00**

Payment can be made by cheque, money order, direct debit or in cash.

Fees are due on the first of July annually

<b>Payment</b> Membership Fee: _____ Total: _____	<b>Form of payment</b> Cheque <input type="checkbox"/> Money Order <input type="checkbox"/> Direct Debit <input type="checkbox"/> Cash (in person) <input type="checkbox"/>
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Please enclose cheque/mail order and post to: PO Box 646N North Cairns Qld 4870