

# DOMINION RD

## Dominion Rd Business Association MEMBERSHIP CONTACT FORM

Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Facebook Page: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Nominated Contact Person:**  
***In the case of a non-individual entity***

“Each Member who is not an individual shall nominate an individual contact person to act on its behalf in all matters relating to the Association, and shall notify the Secretary of that representative’s details.”

Nominated Person Name: \_\_\_\_\_

Nominated Person Tel & Mobile \_\_\_\_\_

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

***If different from above***

Authorised by: Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

25 words for website listing

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Please complete this form and either mail back to us or scan and email.  
Please also send us a high res version of your logo or any photos / images you would like to use on your website listing.