



The Sydney Food  
Fairness Alliance  
(SFFA) promotes  
community food  
security and  
sustainable  
food systems.

## Sydney Food Fairness Alliance Inc APPLICATION FOR MEMBERSHIP

### PLEASE COMPLETE FOR OUR MEMBERSHIP RECORDS:

Information collected will be held with the SFFA Management Committee membership records. Do you consent for the following information to be shared with other SFFA members for the sole purpose of contacting you to request assistance and/or notify you of SFFA activities and events?

Please tick:  YES  NO

### DETAILS:

Name of applicant, individual or organisation/group: \_\_\_\_\_

If you are an organisation of group, your representatives will be:

1. \_\_\_\_\_ 2. \_\_\_\_\_  
*name name*  
\_\_\_\_\_  
*position position*

Programs/projects you are involved in that may be of interest to SFFA?: \_\_\_\_\_

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

Email address: \_\_\_\_\_

Postal address: \_\_\_\_\_

Website: \_\_\_\_\_ Communication preference: \_\_\_\_\_

### PLEASE TICK YOUR PERSONAL/ORGANISATIONAL INTERESTS:

#### 1. Food security

Nutrition  Health/Health Promotion  Social Policy  Social justice

#### 2. Sustainable food systems

Organics  Community Gardens  Producers  Growers  Urban Agriculture

Community Education  Other: \_\_\_\_\_

### PLEASE TICK YOUR PERSONAL/ORGANISATIONAL SKILL AREAS:

Advocacy  Community Arts  Community Development  Evaluation

Event Organization  Facilitation  Funds Management  IT skills & design

Media Publicity  Policy Writing  Proactive Task Management  Project Management

Submission Writing  Volunteering/Volunteer Management  Other: \_\_\_\_\_

### PAYMENT OF YEARLY MEMBERSHIP FEE:

\$25 waged or  \$5 unwaged individual  \$50 organisation or group

**SEND COMPLETED FORM and CHEQUE/MONEY ORDER TO:** Sydney Food Fairness Alliance Inc  
c/- Pat Rayner Treasurer SFFA GPO Box 1241 SYDNEY NSW 2001

**SEND COMPLETED  
MEMBERSHIP  
APPLICATION FORM  
and CHEQUE/MONEY**

**ORDER TO:** Sydney Food  
Fairness Alliance Inc  
c/- Pat Rayner  
Treasurer SFFA  
GPO Box 1241  
SYDNEY NSW 2001

## Membership agreement

On this day the \_\_\_\_\_ I, \_\_\_\_\_  
*date* *name/organisation/group name*  
of \_\_\_\_\_  
*address*

hereby apply to become a member of the Sydney Food Fairness Alliance Inc. In the event of my admission as a member, I agree to support the rules of the association and the goals of the Sydney Food Fairness Alliance Inc. The goals are to promote community food security and sustainable food systems.

Individual membership signature: \_\_\_\_\_

Organisational membership signature — representative/s from organisational/group: \_\_\_\_\_

Name 1: \_\_\_\_\_ Signed: \_\_\_\_\_

Name 2: \_\_\_\_\_ Signed: \_\_\_\_\_

## NOMINATOR\*

On this day the \_\_\_\_\_ I, \_\_\_\_\_  
*date* *name of SFFA member*

being a member of the association, hereby nominate the aforementioned applicant/s, who is/are personally known to me, for membership of the association.

Signed: \_\_\_\_\_

## SECONDER\*

On this day the \_\_\_\_\_ I, \_\_\_\_\_  
*date* *name of SFFA member*

being a member of the association, hereby nominate the aforementioned applicant/s, who is/are personally known to me, for membership of the association.

Signed: \_\_\_\_\_

### DOES YOUR ORGANISATION HAVE ANY OF THE FOLLOWING THE SFFA MIGHT BE ABLE TO ACCESS?

- Meeting rooms—max capacity: \_\_\_\_\_ Free of charge/cost \$ \_\_\_\_\_
- Conference rooms—max capacity: \_\_\_\_\_ Free of charge/cost \$ \_\_\_\_\_
- Audio-visual equipment (please specify) \_\_\_\_\_
- Catering  Photocopiers  Printing service  Audio-visual equipment—type: \_\_\_\_\_

### OFFICE USE: SFFA MANAGEMENT COMMITTEE — PLEASE CIRCLE

This application is **ACCEPTED** / **REJECTED** by the Management Committee

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

### \* NOMINATOR AND SECONDER NOT REQUIRED FOR MEMBERSHIP RENEWALS