

2021/22 Membership Form

Category (please tick): Accommodation Hotel Tavern/Hotel Club Wayside Inn Restaurants/Cafes/Small Bars/Craft Breweries

Division (please tick): Darwin Alice Springs & Ayers Rock Regional Towns (Katherine, Tennant Creek, Jabiru & Gove)

Name of Business: _____

Company Name: _____

Authorised Representative who is eligible to be on the Hospitality NT Board and vote in elections conducted by the Australian Electoral Commission: _____

ABN: _____

Street Address: _____ P/code: _____

Postal Address: _____ P/code: _____

Telephone No: _____ Website: _____

Manager's Name: _____

Email Address: _____ Mobile No: _____

Contact (other than Manager specified above) who should receive correspondence, e.g. the Weekly Update:

Name: _____ Mobile No: _____

Position: _____ Email: _____

Venue Details: (please tick facilities provided and complete where applicable)

- | | |
|---|--|
| <input type="checkbox"/> Accommodation rooms - Number of rooms: ____ | <input type="checkbox"/> KENO |
| <input type="checkbox"/> Bottleshop | <input type="checkbox"/> SKY Channel |
| <input type="checkbox"/> Gaming Machines – No. of gaming machines: ____ | <input type="checkbox"/> UBET facilities |
| <input type="checkbox"/> Late Night Trading Licence (4.00am) | <input type="checkbox"/> Licensed patron capacity no: ____ |
| <input type="checkbox"/> Foxtel | |

Please note:

- Member information is not provided to organisations other than those which are associated with Hospitality NT
- Industrial relations advice will only be provided to the business owner/s, nominee, manager or HR manager as advised from time to time and such persons who hold themselves out to be one of these officers

Signed: _____

Print Name: _____

Date: _____

Please return to the Hospitality NT office by email admin@hospitalitynt.com.au