

# ORGANISATIONAL MEMBERSHIP APPLICATION FORM

PLEASE KEEP A COPY OF THIS FORM FOR YOUR RECORDS

**Organisational Membership of SACOSS is subject to approval by the SACOSS Board which meets monthly.**

<b>Organisation Details</b>	In this section please provide details of the organisation applying for membership. <b>Please submit a copy of the organisation's constitution.</b>		
Legal Name and 'Trading as' (if applicable)			
Organisation ABN			
Physical Business Address			
Postal Address (if different to above)			
Main Business Phone Number		General Business Email Address	

**Organisational members receive two votes at the SACOSS AGM and elections.** Please nominate a Primary Contact & Voting Representative 1, and a Secondary Voting Representative. The Primary Contact will be the first point of contact for SACOSS member-related business. Both people listed below will receive all SACOSS general communications.

## Primary Contact & Voting Representative 1

Name			Position title		
Mobile		Direct		Email	

## Voting Representative 2

Name			Position title		
Mobile		Direct		Email	

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## Table of Membership Fees

Fees apply for one year from 1 July to 30 June and are based on the organisation's total annual turnover from all sources. For your first year of membership we pro rate our fees on a quarterly basis. On receipt of your application SACOSS will issue a Tax Invoice with your pro rata membership fee for this year.

### Please select your Membership Category

Total Annual Turnover	Annual Fee inc GST	Total Annual Turnover	Annual Fee inc GST
<input type="checkbox"/> Less than \$100k	\$105	<input type="checkbox"/> \$2.5m to under \$5m	\$1235
<input type="checkbox"/> \$100k to under \$500k	\$330	<input type="checkbox"/> \$5m to under \$20m	\$1670
<input type="checkbox"/> \$500k to under \$1m	\$555	<input type="checkbox"/> \$20m to under \$50m	\$3115
<input type="checkbox"/> \$1m to under \$2.5m	\$895	<input type="checkbox"/> Over \$50m	\$5665

**Payment Options** On receipt of your Tax Invoice please pay via Credit Card, EFT Transfer or Cheque as detailed on your invoice.

## SOUTH AUSTRALIAN COUNCIL OF SOCIAL SERVICE – VALUES STATEMENT

### Vision

Justice, opportunity and shared wealth for all South Australians.

### Purpose

To advocate, collaborate, lead and mobilise to eliminate poverty, inequality and injustice in South Australia.

### Goals

Developing a Fair and Just Community for South Australians

Cultivating a Thriving Community Sector Assisting People to Address Poverty and Disadvantage

SACOSS is a Healthy, Resilient and Sustainable Organisation equipped to support the community services and health sectors to achieve our vision

**Commitment:** On behalf of my organisation, as a member of SACOSS I agree to abide by its Vision, Purpose and Goals:

Name			
Signature:		Date	

### Feedback, Engagement and Confidentiality

SACOSS welcomes member feedback and active engagement in the work of SACOSS. SACOSS is committed to maintaining the privacy of information about its members.

### Please return this form to:

SACOSS 47 King William Road, UNLEY SA 5061 or via email to [accounts@sacoss.org.au](mailto:accounts@sacoss.org.au)



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