



# Pittsworth Show Society Inc.

Established 1901

ABN: 25 361 214 043

P.O. Box 6, Pittsworth Qld 4356

Email: [pittsworthshow@gmail.com](mailto:pittsworthshow@gmail.com)

Phone: 0488 054 416

## 2025 Pittsworth Show Renewal / Application Membership Form

Membership valid from 1<sup>st</sup> January - 31st December

Names of the Adult/s taking out membership: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

\_\_\_\_\_  
Signature of Adult 1

\_\_\_\_\_  
Signature of Adult 2

Children/s names in your immediate family up to 18 years covered by this membership.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please indicate the ages of your family members in the following age brackets for reporting purposes to QLD Ag Shows:*

0 – 5 years	6 – 17 years	18 – 25 years	26 – 35 years	36 – 40 years	41 – 59 years	60 + years

*Please indicate membership type:*

FAMILY MEMBERSHIP (2 Adults + immediate children up to 18 years)	<input type="checkbox"/>	\$40.00
SINGLE ADULT	<input type="checkbox"/>	\$20.00
PENSIONER	<input type="checkbox"/>	\$10.00

All new membership applications must be approved at a Management Meeting as per the Pittsworth Show Society Incorporated Rules. Applications, along with payment, **must be received by 31st January** to be considered for approval in time for the show.

*Please include payment with this renewal/application:*

- Direct Deposit (details below) – include a copy of bank receipt
- Cash (in Person)
- EFTPOS (in Person)

*Direct Deposit Details:*

Heritage bank: Pittsworth Show Society Inc.  
 BSB: 638-070  
 Account Number: 126 565 34  
 Reference: **MEMBERSHIP & Name**

*Return this form with payment via:*

Email to [pittsworthshow@gmail.com](mailto:pittsworthshow@gmail.com)  
 Post to P.O. Box 6, Pittsworth Qld 4356

Membership enables free entry to the show and allows for nomination to management committee, enabling the right to vote at general meetings and to nominate a fellow member to the management committee.

**Office Use Only**

Application Received:		Payment Received:	
Receipt Number:		Membership Card/s dispatched:	