FOREST MANAGEMENT PROFESSIONAL ASSOCIATE APPLICATION 2023/24



I/We hereby apply as a Forest Management Professional / Consultant Associate Member with an individual or business turnover of less than \$500,000 per annum.

Your Details:	
Company:	
Contact Name:	
Address:	
	P/code
Postal	
Address:	P/code
Telephone:	Fax:
Email:	
Please indicate (\checkmark) your predominant fores	et management professional categories or services (up to 5).
Native forest silviculture	Forest valuation
Plantation management	Agroforestry
Carbon forestry	Wood properties
Fire management	Biosecurity
Natural resource management	Weed and pest management
Water management	Environmental certification
Forestry economics	Other:
Other:	
Fee	
\$ 500 +GST per annum = \$ 550.00	
<u> </u>	
Payment: Mastercard	☐ (payable to Timber Queensland Ltd)
	- " ,
Please contact Timber Queensland for Dire	ect Debit details
Credit Card Details/	/ Expiry Date/_
Amount: \$ Na	ame on Card:
Signature:	
Authorised Person:	
Signature:	
Name:	
Date:	

Please complete and return via email to <u>admin@timberqueensland.com.au</u> or post to Timber Queensland, PO Box 231, Kedron, QLD 4031.