Representing the Limousine Industry Since 1971

Telephone : 0400 306 756 Mobile : 0400 306 756	PO Box 89 CHERMSIDE SOUTH QLD 4032	Website: http://www.laq.com.au e-mail : secretary@laq.com.au		
LAQ ABN : 80 913 236 196				
Membership	Membe	embership - I'd like to join the LAQ rship Renewal of Membership Details		
	Mem	bership No:		
		Invoice #:		
	Date:			
If this is a new membership please complete all d	details. If this is a renewal or change of member details.	ils, enter details that have changed only		
Membership No: Contact Name:				
Trading Name:				
Address:	Suburb:	Post Code:		
Tel (Bus):Tel (Mob):	Email:			
We	ehsite:	ABN:		
	bolic.			
_				
Where do you operate? (Circle all that apply) Surgel	& Port Douglas / Whitsundays / Towns	ville / Bundaberg / Wide Bay / Burnett /		
Where do you operate? (Circle all that apply) Sunshi	ine Coast / Brisbane / Ipswich / 100woo	mba / Gold Coast / Other (Please supply details)		
QT Accreditation No(s):				
Do you OWN or LEASE your Qld Limousine S		ers)		
	Rest of Qld, Re			
I LEASE IN Whole of Qld,		gional Licences		
I LEASE OUT Whole of Qld,	, Rest of Qld, Re	egional Licences		
I operate Sedans				
l operate Stretches				
l operate Vintage	(Please specify Model(s)	Colourfa) Aga)		
(Please specify Model(s), Colour(s), Age)				
I wish to Join / RENEW my membership to the L		nc. and payment is attached		
Payment: Cheque / Money Order i				
Payment transferred to l		D BSB: 124002		
For: \$100.00 for Annual Me	mbership (GST not applicable) y, please contact the Secretary to c	onfirm		

By signing this membership form I hereby agree to abide by the Rules of the Limousine Association Queensland Inc.

Signature:	Date: / /	