

Card Number:

Marsden Quality Meat Club Application Form

Applicant Information

Name:

Email:

Phone A/H:

Ph. Business hours:

Mobile:

Current address:

City:

State:

Postcode:

Additional Information

Are there any particular products you would like us to keep you informed about (i.e. special packs, Xmas hams, bulk buys etc.)?

Are you involved with any clubs/organizations that would benefit from purchasing quality meat and would like a quote from us?

Is there anything else you would like us to note (i.e. suggestions for improvement/new products etc.)?

I confirm that I am the above mentioned applicant and that I give permission for Marsden Quality Meats to contact me, through the contact details provided, with information pertaining to my membership of the Marsden Quality Meat Club.

Signature of applicant:

Date:

Signature of Staff member:

Date:

Office Use Only:

Please check legibility of all details and amend if necessary.

Application Received Date:

Card Number Issued:

Signature of Staff member:

Name of Staff Member: