

DAIRY FARMERS MILK CO-OPERATIVE LIMITED

MEMBERSHIP APPLICATION FORM

[See last page for instructions on how to complete this form]

MEMBERSHIP APPLICATION FORM

DAIRY FARMERS MILK CO-OPERATIVE LIMITED (ARBN 108 690 384)
("DFMC")

Registered Office: Level 12, 60 Carrington Sreet, Sydney 2000
Postal address: PO Box 72, Lidcombe NSW 1825

1. APPLICATION

The person listed in Schedule 1 of this form (called the "Applicant") applies for membership of DFMC.

2. RULES

The Applicant agrees to be bound by the rules of DFMC in force from time to time.

3. SUPPLY

If the Applicant becomes a member of DFMC, the Applicant undertakes to commence supplying the milk it produces to DFMC as from the date the Applicant is admitted to membership or such other date as may be mutually agreed.

4. SHAREHOLDER INFORMATION PACKAGE

The Applicant acknowledges receipt of the following documents:

- (a) A disclosure statement under Section 70 of the Co-operatives National Law 2012 which incorporates a summary of the rights and liabilities attaching to the Shares in DFMC and
- (b) A copy of the rules of DFMC
- (c) A copy of the last Annual Report of DFMC

5. INTERPRETATION

In this form:

- (a) the singular included the plural and vice-versa;
- (b) the word "person" includes a firm, body corporate, unincorporated association, authority or government agency;
- (c) Dairy Authority or Dairy entity means any Authority or entity which has regulatory powers in relation to the issue of dairy licences.

Please sign and date:

Applicant's signature

Date

SCHEDULE 1 – Applicant

Full Name: _____

Address: _____

_____ Post Code _____

Telephone: _____ Facsimile: _____

Mobile: _____

Email address _____

Producers Licence Number _____

(or if not held, copies of application for Licence and correspondence with relevant Dairy Authority or Dairy Entity)

INSTRUCTIONS ON HOW TO COMPLETE DAIRY FARMERS MEMBERSHIP APPLICATION FORM

1. If the Application form is not completed correctly Dairy Farmers may still treat it as valid. The decision of Dairy Farmers as to whether to treat the Application Form as valid, and how to construe, amend or complete it, shall be final.
2. A separate Application Form must be completed and signed by each applicant irrespective of whether two (2) or more applicants supply milk from the same farm.
3. The completed Application Form must be forwarded to DFMC at PO Box 72, Lidcombe NSW 1825

Should you have any questions or require any assistance in completing the form please contact the DFMC Regional Manager for your state: Northern - Tony Burnett 0419 006719
Southern - Andrew Cleland 0419 711 663