



South East Queensland  
Indigenous Chamber  
of Commerce

## Membership Application Form:

### Application notes:

People applying for membership of the SEQICC should be prepared to answer reasonable and respectful questions about their Aboriginal or Torres Strait Islander heritage, and the ownership, management, and control of their business, and whenever requested, provide relevant supporting documentation.

### A person(s) claiming to be an Aboriginal and/or Torres Strait Islander business owner is required to:

- be of Aboriginal and/or Torres Strait Islander descent; and
- identify as an Aboriginal and/or Torres Strait Islander;
- be accepted as an Aboriginal and/or Torres Strait Islander person by the community in which they live, or formerly lived;

AND

- provide as evidence and written confirmation of each of the above from an Aboriginal or Torres Strait Islander Controlled legal entity; OR
- provide evidence of their genealogy (Family Tree supported by Births, Deaths and Marriage certificates) and documentation that demonstrates Aboriginal or Torres Strait Islander Descent; OR
- be a business owner of a Supply Nation Registered or Certified business and provide documentation that attests to this OR
- be a business owner of another Indigenous Chamber in Australia (e.g. Kinaway, NSWICC, NTIBN) and provide documentation that attests to this.

### Membership Categories:

#### 1. Applying for Full Membership

In accordance with the SEQICC Constitution (2020) Rule 5(3), the management committee must be satisfied the applicant meets all of the below points to be accepted as a Full Member of the Chamber:

Any Aboriginal and/or Torres Strait Islander person who:

- (a) owns, controls and manages;
- (b) an enterprise that is sole-trader, partnership, company, or Indigenous corporation;
- (c) that operates as a for-profit business that is headquartered in South East Queensland.

## **2. Applying for Associate Membership**

In accordance with the SEQICC Constitution (2020) Rule 5(4), the management committee must be satisfied that the applicant meets all of the below points to be accepted as an Associate Member of the Chamber:

- (a) Any Aboriginal and/or Torres Strait Islander person who owns, manages, and/or controls, an enterprise that is a sole trader, partnership, company, or Indigenous corporation, that operates as a for-profit business, that has an office in South East Queensland.
- (b) Any Aboriginal and/or Torres Strait Islander person who owns, manages, and/or controls, an enterprise that is a partnership, Indigenous corporation, incorporated association or similar, that operates as a not-for-profit business in South East Queensland.

## **3. Apply to be a SEQICC Supporter**

In accordance with the SEQICC Constitution (2020) Rule 5(5), the management committee must be satisfied that the applicant meets all of the below points to be accepted as a supporter of the Chamber:

- (a) Any person, that is a company, business, organisation, entity or public institution; and
- (b) supports the objects of the Chamber as outlined in Rule 3.



**1. Are you applying for:**

<input type="checkbox"/> Full membership	<input type="checkbox"/> Associate Membership	<input type="checkbox"/> SEQICC Supporter
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**2. Name of Business:** \_\_\_\_\_

If you a sole-trader, partnership, Company or Indigenous corporation please provide your:

<input type="checkbox"/> ABN	<input type="checkbox"/> ACN	<input type="checkbox"/> ICN
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**Number:** \_\_\_\_\_

**Name of representative from the Business:** \_\_\_\_\_

**What is your role in the Business:** \_\_\_\_\_

**3. Business Address:**

**Is this your business located in**

- SEQ Headquarters
- SEQ regional office

**4. Email Address:** \_\_\_\_\_

**5. Preferred Contact number:** \_\_\_\_\_

**6. Postal Address:** \_\_\_\_\_

**7. If you are applying for full membership are you:**

<input type="checkbox"/> a Certified Supplier of Supply Nation?	<input type="checkbox"/> a Registered Supplier of Supply Nation?
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**A member of another Indigenous Chamber (please circle)**

<input type="checkbox"/> NTIBN	<input type="checkbox"/> NSWICCC	<input type="checkbox"/> KINAWAY	<input type="checkbox"/> TRIBN	<input type="checkbox"/> CRIBN
<input type="checkbox"/> OTHER – member of another Aboriginal and/or Torres Strait Islander peak body or organisation Please Specify _____ *Please provide documentation providing proof of your Certification, Registration or Membership with your application form.				

**8. If you are applying for associate membership are you:**

<input type="checkbox"/> For-profit business	<input type="checkbox"/> A not-for-profit organisation or business
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AND

<input type="checkbox"/> a Certified Supplier of Supply Nation?	<input type="checkbox"/> a Registered Supplier of Supply Nation?			
<input type="checkbox"/> NTIBN	<input type="checkbox"/> NSWICCC	<input type="checkbox"/> KINAWAY	<input type="checkbox"/> TRIBN	<input type="checkbox"/> CRIBN
<input type="checkbox"/> OTHER – member of another Aboriginal and/or Torres Strait Islander peak body or organisation Please Specify _____ *Please provide documentation providing proof of your Certification, Registration or Membership with your application form.				

**9. If you are applying for associate membership are you:**

<input type="checkbox"/> For-profit business	<input type="checkbox"/> A not-for-profit organisation or business
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AND

Confirm that you support the objects of the Chamber as outlined in Rule 3 of the 2020 Constitution.