



Indigo Regen Inc. Membership Form

Creating and celebrating regenerative practices that nurture the health of our communities, biodiversity and our planet.

Membership Application

Thank you for your interest in joining Indigo Regen Inc. By becoming a member, you support our mission to promote sustainability, reduce waste, and create a resilient and connected community.

Membership Options

(Please select one)

- ☐ **Single Membership** – \$20 per year
 - ☐ **Family Membership** – \$30 per year (includes all members of the household)
 - ☐ **Donation** – \$.....
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Applicant Details

Full Name: _____
Address: _____
Phone Number: _____
Email: _____

For family membership, please list the names of other household members:

1. _____
2. _____
3. _____
4. _____

(Attach additional names if required)

Areas of Interest

(Please tick any areas where you would like to be involved or learn more about)

- ☐ Reducing food waste, composting, composting seats, worm farms
 - ☐ Growing food (community gardens, PODS)
 - ☐ Reducing textile waste (slow fashion initiatives)
 - ☐ Sharing knowledge (education, newsletters, workshops, market stalls)
 - ☐ Supporting community transport (car share, community car)
 - ☐ Promoting natural burial (Beechworth Cemetery)
 - ☐ Endorsing plant-based sustainability initiatives
 - ☐ Reducing emissions
 - ☐ Managing climate change risks
 - ☐ Other (please specify): _____
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Agreement & Declaration

By submitting this form, I acknowledge that I support the vision and values of Indigo Regen Inc. and agree to uphold the principles of respect, integrity, kindness, future focus, inclusivity, collaboration, curiosity, and sustainability in all interactions within the organization.

- ☐ I agree to abide by the values and mission of Indigo Regen Inc.

Signature: _____

Date: _____

Payment Details

Membership fees may be paid via bank transfer to:

Account Name: Indigo Regen Inc.

BSB: 633 000

Account Number: 224 165 977

Reference: Your Full Name

(Alternatively, cash payments can be made at our next event or meeting.)

For Office Use Only

Date Received: _____

Payment Confirmed: ☐ Yes ☐ No

Membership Approved: ☐ Yes ☐ No

Indigo Regen Representative: _____