

APPLICATION FOR A POSITION ON THE MACALISTER CUSTOMER CONSULTATIVE COMMITEE

PERSONAL DETAILS:

Name:					
Address:					
Home Phone:	Mobile:				
Are you a Southern Rural Water (SRW) irri within the Macalister irrigation district?	gation customer	□ Yes	□ No		
If Yes, please provide your ABA number: _					
EDUCATION:					
Schools, colleges and universities attended	d:				
Trade or Professional qualifications:					
Memberships of professional / community organisations etc					
FARM BUSINESS EXPERIENCE:					

Your involvement in the far	rming business?	□ Owner	Farm Ma	anager/Employee
What type(s) of farm busin	ess do you own an	d/or operate?		
How many years have you	been in the farmin	g business?		/ears
Size of farming enterprise: (please tick one)	☐ up to 10ha ☐ 10 to 30ha ☐ above 30ha	Type of irriga		☐ flood ☐ spray ☐ drip
Can you provide some exa are (or have been) accoun				in which you
Why are you interested in through the Macalister Cus			ation commu	unity
What experiences / knowle Consultative Committee?	edge can you bring	to the Macalis	ster Custome	er

Thank-you for your interest in applying for a position on the Macalister Customer Consultative Committee. Please submit this application to Hayley Taylor, Southern Rural Water via email to hayleyt@srw.com.au, or by dropping the form into the SRW Maffra Office at 88 Johnson Street Maffra, by 14 November 2025.