**Application for Membership of Association**

**with Woden Community Service Incorporated**

*WCS Inc. Constitution 2020 – Appendix 1 - reference: rule 4(a)*

Woden Community Service Incorporated (incorporated under the *Associations Incorporation Act, 1991 (ACT)*)

**Full name of Applicant:**

*(please print your name, including salutation)*

hereby applies to become a member of the above named Incorporated Association and provides the following contact information for the serving of notices ~

🞏 **Address** of the applicant:

*(please print your address)*

🞏 **Email** of the applicant: @

*(please print your email address)*

*(Tick the box corresponding to the method that you prefer to receive Association notices, noting the preference of the WCS Board is by electronic means.))*

**Phone number** of the applicant:

In the event of my admission as a member, I agree to be bound by the Constitution of Woden Community Service Incorporated for the time being in force and I attest that I am a person at least 18 years of age and a person who resides and/or works in the ACT or region.

Date:

Full Name of proposing member #1:

Address of proposing member #1:

Full Name of proposing member #2:

Address of proposing member #2:

*Form to be sent to the Secretary of the Board:* [*Secretary.Board@wcs.org.au*](mailto:Secretary.Board@wcs.org.au)*, or PO Box 35, Woden ACT 2606*

*and must be received a minimum of 7-days prior to an Annual General Meeting.*

*Please note member’s information is retained in the Association’s Register of Members pursuant with the Associations Incorporation Act, 1991 (ACT) and by law can be made available to Members of the Association to view.*

*If you require that your personal contact information is not disclosed, please contact the Secretary to advise.*