

Application for membership of Woden Community Service

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

I, _____
(full name of applicant)

of _____
(address)

_____ hereby apply to become (occupation)
a member of the above named incorporated association. In the event of my admission
as a member, I agree to be bound by the rules of the association for the time being in
force.

(signature of applicant)

(Date)

I, _____
(full name)

a member of the association, nominate the applicant, who is personally known to me, for
the membership of the association.

(signature of proposer)

(Date)

I _____
(full name)

a member of the association, nominate the applicant, who is personally know to me, for
membership of the association.

(signature of seconder)

(Date)

Please return this form to:

WCS Membership, PO Box 35, Woden ACT 2606 or email info@wcs.org.au