



MEMBERSHIP APPLICATION

Friends of Big Swamp Inc

I,
(insert name)

of
.....
(residential address)

apply to become a member of the above Association. I agree to be bound by the rules of the Association.

Signature:

Date:

Nominated by:

Signature of Member:

I can be contacted on:.....
(home phone) (mobile)

My email address is:

Emergency Contact Number:
(name and contact number)

What life skills and experience do you have to share with the group?
.....

MEMBERSHIP SUBSCRIPTION \$10.

Bank transfer: Friends of Big Swamp Inc,
Commonwealth Bank, BSB 066507. Account: 10143182

Your name and address will be recorded in a register of members and can be made available to other members upon request under section 53 of the Associations Incorporation Act.2015.