



Murwillumbah Community Centre
PO Box 722, Murwillumbah 2484
Ph: 02 66723003 Fax: 02 66726280
ABN: 79 073 211 619
www.mccentre.org.au info@mccentre.org.au

APPLICATION FOR MEMBERSHIP

(Incorporated under the Associations Incorporation Act, 1984)
Please return form

I, _____ of: _____
(Full name of applicant) (Address and phone number)

(Occupation)

**do hereby apply for membership of the above mentioned incorporation 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 _____ a member of the association, nominate the
applicant, for membership of the association.

Signature Date

Accepted / not accepted at committee meeting

Date

Fees: \$1.10 joining fee and \$2.20 annual subscription

Date paid: _____ Receipt No. _____