**I,.........................................................................................................................................................(name in full)**

**Of.......................................................................................................................................................(address) State: …………………… P/Code: ………………………….**

**Phone: ........................................................... MOBILE: .....................................................................**

**Email: ................................................................................................................................................**

 **D.O.B: ............/……………/...................**

**Request to become a member of Kinglake Ranges Neighbourhood House Inc**

**I shall be bound by the rules of the Association, and with the Statement of Purpose.**

**Signature of Applicant.............................................................................................................................**

**Date: ............./............./………...........**

**I, ........................................................................................................................................................(name)**

**a member of the Association, nominate the applicant for membership of the Association.**

**Signature of Proposer.....................................................................................(date)............/.........../…….........**

*COMMITTEE USE ONLY:*

*approved/declined: ………….......................... Entered into register: Y / N date ........./......../……….....*

**I, ........................................................................................................................................................(name)**

**a member of the Association, nominate the applicant for membership of the Association.**

**Signature of seconder....................................................................................(date).........../.........../….............**