



TOUKLEY NEIGHBOURHOOD CENTRE INC

Ph: 02 4396 1555 | Fax: 02 4396 5818 | Email: admin@tnc.org.au | Website: www.tnc.org.au | ABN: 64 997 484 484
Association No: Y02437-47 | Post: Toukley Neighbourhood Centre, PO Box 55, Toukley NSW 2263

Existing Member: Membership No _____

New Member (never been a member before)

APPLICATION FOR MEMBERSHIP

Toukley Neighbourhood Association Incorporated (incorporated under the Associations Incorporation Act 2009)

I,

[full name of applicant]

of

[address]

[occupation]

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

I request that only my name be available for inspection by members. All other information is private and not available for inspection.

I have paid to the Association the sum of \$5 being full amount for general membership.

I have paid to the Association the sum of \$2 being full amount for associate membership.

Signature of applicant

Date

Other Information Requested:

Contact Phone Number/s

Email Address

Myself, and/or my Partner, is in receipt of a Centrelink Benefit and/or holds a Health Care Card or can otherwise claim a low income/disadvantaged status. **(Not essential for membership but may influence the types of services that are available to the member through Toukley Neighbourhood Centre Inc.)**

I would like the opportunity to be nominated and/or elected to the Board of Management and/or vote at General meetings.

THIS FORM BECOMES YOUR RECEIPT UPON YOUR PAYMENT OF ASSOCIATION FEES,
AND YOUR AGREEMENT TO COMPLY WITH THE RULES OF THE ASSOCIATION'S CONSTITUTION.

