



CENTRAL NORTH COAST NATIONAL AGRICULTURAL SOCIETY

LTD.

ABN 71 003 023 765

APPLICATION FOR MEMBERSHIP

I,

[full name of applicant]

of

[residential address]

.....
[e-mail address]

____ / ____ / ____ - ____ - ____ - ____ - ____

[date of birth dd/mm/yyyy]

[best telephone contact number]

hereby apply to become a member of the abovenamed incorporated Association. In the event of my admission as a member, I agree to be bound by the Constitution, **by-laws, policies, and procedures** of the Association for the time being in force.

..... / /

Signature of applicant [parent/guardian to sign if under 18 years of age]

Date

Payment Method: Cash/Cheque or
Direct Deposit to:
BSB: 704-189
ACC: 00010009
REFERENCE: Your Name

OFFICE USE

Confirmed Member Number: _____
Paid by: EFT / CHEQUE / CASH
Date: ____ / ____ / ____