



Office use only

- Meeting reminder sent
- Fee reminder sent
- Membership paid
- Date paid
- Add to newsletter mailing list
- Housing Officer to activate
- ID Checked

Evidence supplied

NOTE: Separate applications for each member to be passed

MEMBERSHIP APPLICATION

Mr/Mrs/Ms/Miss (Circle)

First Name: _____

Surname: _____

Date of Birth: _____

Address: _____

_____ Postcode: _____

Postal Address: _____

_____ Postcode: _____

Phone: _____ Mobile: _____

Email: _____

How long have you lived in the Bowen, Collinsville or Proserpine region? _____

Evidence of living in Bowen for at least 6 months (circle and attach evidence)

Centrelink / Electric or Gas Bill / Support Agency Letter / Other: _____

Previous address (if lived in area for less than 6months): _____

_____ Postcode: _____

Proof of Identity (tick and attach all)

- Birth Certificate Confirmation of Aboriginality Photo ID

Please circle all that are applicable:

Applicant: Aboriginal/Torres Strait Islander/South Sea Islander/Other: _____

Spouse: Aboriginal/Torres Strait Islander/South Sea Islander/Other: _____

Dependants (indicate how many): Aboriginal _____ Torres Strait Islander _____

South Sea Islander _____/Other: _____

Please note:

- You have to have lived in the area for no less than 6 months to become a member (Bowen, Collinsville or Proserpine)
- You must be present at the Girudala Community Cooperative Society General Meeting to have your application for membership passed by the community
- General meetings are held quarterly and are advertised in the Notices Section of the local papers prior to that date and a reminder letter will be sent
- Fees are due within 14 days of membership being passed. Membership fees are \$2.20 and a \$1.10 administrative fee. Renewal fees (\$2.20 only) are due every 1st July thereafter to keep your membership active. Failure to pay fees will result in membership cancellation.

Signature of applicant: _____

Print Name: _____

I verify the information I have provided is true and correct.

Date: _____

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Membership passed by: _____

Membership seconded by: _____

Membership accepted: **Yes** **No**

Signature of Director: _____

Date of Meeting: _____