



I'm still **LEARNING**

Empowering people
who have lost a partner

APPLICATION FOR MEMBERSHIP

Name _____

Organisation _____

Address _____

Suburb _____ P'code _____

Phone _____ Mob _____

E-mail _____

I wish to apply for membership of I'm Still Learning Inc. I agree to abide by the rules of the Association, and uphold its aims and objectives.

Signed _____ Date _____

*** This application for membership shall be automatically accepted by I'm Still Learning Incorporated and ratified by a resolution of a Committee meeting following receipt of the application. Prospective members will be notified only if there are any irregularities in relation to their application.*

Accepted by Committee of Management.

Signed _____ Date _____

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