

Membership Application Landcare Broken Hill Inc.

(Incorporated under the Associations Incorporation Act 2009)

APPLICANT I,(full name	ne)
of[addres	ss)
[email address)	
(telephone) (occupation)	
apply to become a member of Landcare Broken Hill, an incorporated association.	
Upon becoming a member, I agree to be bound by the current Constitution of Landcare Broken Hill.	
My areas of interest in Landcare	
SignatureDate	
PROPOSER I,(full name)	
a member of the association, nominate the applicant for membership of Landcare Broken Hill.	
Signature Date	
SECONDER I,(full name)	
a member of the association, second the nomination of the applicant.	
SignatureDate	

If you do not have a proposer and seconder, the Committee will arrange them for you.

Annual membership fee \$10. If you pay by EFT, please clearly state your name as reference.

Account - Landcare Broken Hill ANZ Bank BSB 012551 A/c 572608599

Email application to LandcareBrokenHill@gmail.com Post PO Box 536, Broken Hill, NSW, 2880