

**APPLICATION FOR MEMBERSHIP/ASSOCIATE MEMBERSHIP
RENEWAL OF ASSOCIATION**

(Incorporated under the Association Incorporations Act, 1984)

.....
Full name of Applicant

.....
Address

.....
Telephone Number (Home/Work) Mobile Number Email address

Pole Depot Community Centre (PDCC) Board may occasionally seek the support/input of its members on specific issues. Would you be prepared to assist us? Yes No

In order to identify potential support, could you please complete the following:

Country of birth:

Occupation:

Skills/experience:

- | | | |
|--|---|---|
| <input type="checkbox"/> Marketing / Promotion | <input type="checkbox"/> Human Resource Management | <input type="checkbox"/> Financial Planning |
| <input type="checkbox"/> Submissions / Tenders | <input type="checkbox"/> Accounting | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Working with Government Bodies | |

Others (please list)

Have you used/are using a PDCC service? Yes No

- If yes, please tick relevant service:
- | | | |
|------------------------------------|---|----------------------------------|
| <input type="checkbox"/> Childcare | <input type="checkbox"/> Respite | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Work for the Dole | |
| <input type="checkbox"/> Carers | <input type="checkbox"/> Neighbourhood activities | |

Community involvement (please list):

I hereby apply to renew my Full member Associate member
of the above mentioned incorporated association.

Enclosed is my payment of: \$5.00 as annual full membership fee
 \$2.00 as annual associate membership fee

I agree to be bound by the rules of the association for the time being in force.

.....
Signature of Applicant

.....
Date