

**APPLICATION FOR MEMBERSHIP/ASSOCIATE MEMBERSHIP 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:     Childcare       Respite       Chinese  
                                                                   Youth       Work for the Dole  
                                                                   Carers       Neighbourhood activities

Community involvement (please list): .....

Current or previous involvement (please list): .....

Would you be interested in joining the Pole Depot Board?  Yes       No

I hereby apply to become a  Full member       Associate member  
of the above mentioned incorporated association.

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

As a member, I agree to be bound by the rules of the association for the time of my membership.

.....  
Signature of Applicant

.....  
Date

I, ..... a member of the Association, nominate the Applicant,  
Full name  
who is personally known to me for membership of the association.

.....  
Signature of Proposer

.....  
Date

I, ..... a member of the Association, second the nomination of the  
Full name  
Applicant for membership of the Association.

.....  
Signature of Applicant

.....  
Date

<b>Membership Approved / Declined at Board meeting held .....(date)</b>
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