



WE'VE GOT YOUR BACK!

APPLICATION FOR MEMBERSHIP (VOLUNTEER)

Full Name

Address

hereby apply to become an ordinary member of the above named association.

In the event of my admission as a member, I agree to be bound by the rules of the association in force at the time.

Signature of Applicant

Date

Applicant Contact Information:

E-mail

Ph:

PROPOSER

Full Name

a member for the association, nominate the applicant, who is personally known to me, for membership of the association.

Signature of Proposer

Date

SECONDER

Full Name

a member for the association, nominate the applicant, who is personally known to me, for membership of the association.

Signature of Seconder

Date:

Ratified
date

Member notified date