



K.N.C.
Kincumber Neighbourhood Centre

APPLICATION FOR MEMBERSHIP 2020-21

\$5 per Financial Year Due on 1st of July, 2020

I.....

(full name of applicant/organisation)

of.....

(address)

hereby apply to become a member of the Kincumber Neighbourhood above named association. In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force and to pay the Annual Membership Fee as decided by the KDNC Board of Management.

Signed..... Date.....

APPLICANT'S PERSONAL INFORMATION:

Telephone number.....

Email address.....

Date of Birth.....

Occupation.....

Any special skills.....

Reason for becoming a Member.....

I.....

(full name)

a member of the association, nominate the applicant for membership of the association.

Signed..... Date.....

I.....

(full name)

a member of the association, nominate the applicant for membership of the association.

Signed..... Date.....

Approved..... Date.....

Paid...\$..... Receipt No.....