



NT Working Women's Centre

APPLICATION FORM FOR MEMBERSHIP

New membership	Renew Membership	Financial Year	
Name			
Organisation (if applicable)			
Home Address			
Postal Address			
Phone Contacts	Home	Mobile	Fax
Email			
Signature of Applicant	Date / / 20		

(Applications for new membership must be proposed and seconded by current NTWWC members. If you are renewing your membership you need not fill in this section)

Proposed By	Print Name	Signature	Date / / 20
Seconded By	Print Name	Signature	Date / / 20

MEMBERSHIP FEES (prices are GST inclusive)

Individual	\$10.00	Associate Member	\$0.00
Concession	\$ 2.20	Associate Staff	\$0.00
Organisation	\$30.00		

Payment may be made via cheque or by EFT with reference "Memb [surname/ organisation name]" to NT Working Women's Centre Inc. **BSB: 035302 Account#: 359158**

Members who may have a perceived or actual conflict of interest relating to representing a particular organisation or personally are required to declare their interests. Please declare any conflict of interest

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**Thank you for your support of the NT Working Women's Centre.
Please return by fax, e-mail or post. A tax invoice will be issued on receipt of payment.**

(office use only for new members)

Tabled at Com Meeting	Date / / 20
Accepted	Declined