## Application for Membership of the Association Groundswell Gloucester Inc.



Incorporated under the Associations Incorporation Act 2009 (INC1300990)

APPLICANT	CAULED CAU
I,(Print full name of applicant)	
of (Address 1)	
(Address 2) hereby apply for membership of Groundswell Glo accepted, agree to be bound by the Rules of the	ucester Inc, and, if my application is
Signed:	Date:
<i>Email Option:</i> If you consent to having notices, n your preferred address below. (Note: This reduct)	
(Email Address - Optional)	
Home: Mobile (Phone contacts - Optional)	:
PROPOSER (This section may be left blank if you do	not know any existing members)
I, (Print full name of Member)	
of(Address 1)	
(Address 2) declare that I am a member in good standing of the above application for membership.	
Signed:	Date:
Membership fee is \$10 per year, and is renewabl	e at the end of June each year.
Post your completed form and payment to:	
Groundswell Gloucester Inc., PO Box 380, Glouc	ester NSW 2422
A receipt will be mailed on request.	
The membership fee may be paid by direct credit BSB 721 000 Account 100 166 385. Please iden	

will be issued. You will still need to post/deliver the completed membership form.