

CENTRAL TABLELANDS WOODCRAFT INC

ABN 81 846 796 761



MEMBERSHIP APPLICATION

I,	
(Please PRINT full name of applicant)	
Of	
(Please PRINT residential address)	
Postal Address, if different to residential address:	
Home Phone Number:	Mobile Number:
Email Address:	
Hereby apply to become a member of Central Tablelands Woodcraft Inc. In the event of my admission as a member, I agree to be bound by the rules of Central Tablelands Woodcraft Inc.	
<i>Signature of Applicant</i>	Date:
I,, being a financial member of Central Tablelands Woodcraft Inc, nominate this applicant, who is personally known by me.	
<i>Signature of Proposer</i>	Date:
I,, being a financial member of Central Tablelands Woodcraft Inc, nominate this applicant, who is personally known by me.	
<i>Signature of Proposer</i>	Date:
Optional – First name of spouse/partner	
Yearly Membership Fee \$50.00	Yearly Associate Partners \$5.00
PAID AMOUNT:	DATE:

Hon. Secretary PO Box 301 Bathurst NSW 2795

Phone (02) 6332 6215 Email: woodies1990@gmail.com Website: www.woodies.org.au