

# 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	
PAID AMOUNT:	DATE:

Hon. Secretary PO Box 301 Bathurst NSW 2795

Phone (02) 6332 6215 Email: [woodies1990@gmail.com](mailto:woodies1990@gmail.com) Website: [www.woodies.org.au](http://www.woodies.org.au)