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MEMBERSHIP APPLICATION

I wish to apply for membership of Central Hunter Community Broadcasters Inc. I agree to be bound by the provisions of the Constitution. I also accept my membership is not valid until approved by the Management Committee and all fees are paid.

Title: Mr Mrs. Miss. M/s					
Surname:		Given Nam	ıe <u>:</u>	ing and an experience of the second s	
Street:					
Suburb:			° Co	ode <u>:</u>	(18 x 5 (1) 1 x
Telephone: (h	(w)		Mobile		
Email:			· · · · · · · · · · · · · · · · · · ·		
Group Name (if Applicable)		****			
Date of Birth:					
Please circle the application m	embership	type -NOTE	: fees inclu	de GST.	
Concession (\$14)	Ind	ividual (\$20))	Family (\$25)
Non-profit Groups (\$25)	Bus	iness Group	(\$55)		
Bank Details BSB: 637000 A	ccount: 780	114800			
Signed:	: Da	ite:/	<u>/</u> .		
The following information is on				ppreciated	
Interests/Hobbies:	ectronics, Bi	uilding, Scrip	otwriting, Te	echnical.	
Please note all information on t	his members	ship form is s	strictly conf	idential	
OFFICE USE ONLY:		•			
Payment Date: Am	ount Receiv	e \$ <u>.</u> Rece	eipt No		<u>.</u>
Type of I.D.	.Ref:	Sigi	hted by <u>:</u>		<u>.</u>
Membership: Approved / Not A	Approved I	Date/_/_	Members	hip No:	<u>.</u>