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## Application for Membership of Association

### Molonglo Valley Community Council

#### Your details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email address: \_\_\_\_\_

I apply to become a Member of the above named Incorporated Association. On the event of my admission as a Member, I agree to be bound by the Constitution of the Association as may be amended from time to time.

I confirm that I meet the following eligibility criteria (tick at least one as applicable):

#### **Voting Member** (clause 5.2)

I live in the Molonglo Valley District

**OR**

#### **Non-Voting Member** (clause 5.3)

I own property in the Molonglo Valley District

I conduct a business in the Molonglo Valley District

I work in the Molonglo Valley District or am employed by a business based in the Molonglo Valley District

I formerly lived, worked or conducted business in the Molonglo Valley District

I have an interest in the affairs of the Molonglo Valley District

.....  
Name of applicant  
(Please print)

.....  
Signature of applicant

.....  
Date: