Castlemaine District Radio Inc.

Incorporated in Victoria No. A0047091H
ABN 96 208 316 461

APPLICATION FOR MEMBERSHIP OF
CASTLEMAINE DISTRICT RADIO INCORPORATED

I, _____
(Name & Occupation)

of _____
(Address)
desire to become a Member of Castlemaine District Radio Incorporated

Phone_____ Mobile_____

Email_____
In the event of my admission as a Member, I agree to be bound by the Rules of the Association for the time being in force.

Signature of Applicant_____ Date_____

<<<<<<<<<<>>>>>>>>>>

I,_____ a Member of the Association **nominate**
(Name)
the applicant, who is personally known to me, for Member of the Association.

Signature of Proposer_____ Date_____

<<<<<<<<<<>>>>>>>>>>

I,_____ a Member of the Association **second**
(Name)
the nomination of the applicant, who is personally known to me, for Member of the Association.

Signature of Seconder_____ Date_____

<<<<<<<<<<>>>>>>>>>>

PLEASE FORWARD YOUR APPLICATION TO
Castlemaine District Radio Inc., PO Box 1070, Castlemaine 3450

Castlemaine District Radio Inc. WMAfm,
Studios and Office: The Old Castlemaine Gaol, Bowden Street, Castlemaine 3450
Telephone: 03 5472 4376 Mobile: 0409 333 513
Email: wmafmcastlemaine@gmail.com

Appendix 1