



The Illawarra Connection

APPLICATION FOR MEMBERSHIP

I, (status/title)
(Full name of Applicant)

Of
(Company)

Address:

Phone: Fax:

Email: Business Category:

Hereby apply to become a member of the above named incorporated body. In the event of my admission as a Member, I agree to be bound by the rules of the incorporated body for the time being in force.

Signature of Applicant: Date:

I,, as a member of the incorporated body, nominate the Applicant, who is personally known to me, for membership of the incorporated body.

Signature of Proposer: Date:

I,, a member of the incorporated body, second the nomination of the Applicant, who is personally known to me, for membership of the incorporated body.

Signature of Secunder: Date:

*Application Fee: \$100.00 plus GST
A tax invoice will be issued on receipt of the application*

THE ILLAWARRA CONNECTION Inc

PO Box 1573 WOLLONGONG NSW 2500
Telephone 02 4229 4721 Email ticadmin@illawarraconnection.com.au
www.illawarraconnection.com.au

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