

## Membership Application

### Applicant Details

Name \_\_\_\_\_

Address

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Telephone \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_

Reason for application \_\_\_\_\_

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I hereby apply to become a member of Mai-Wel Limited. I agree to be bound by the following –

- Mai-Wel Constitution
- Members & Directors Conflict of Interest Policy

I acknowledge I have read and understood the above documents and agree to disclose all potential and current conflicts of interest.

Applicant Signature ..... Date .....



Fundraising License No 10919  
ABN 88 060 661 476

02 4015 2900

maiwel@maiwel.com.au

PO Box 835, Maitland NSW 2320

www.maiwel.com.au

## Important Information

1. Separate applications are required for each member. Joint application forms will not be accepted.
2. A once only joining fee of \$1.00 per person is payable if application is accepted.
3. Yearly membership fees are \$5.50 per person (incl GST) and cover the current financial year.
4. Total fees payable if application accepted: \$6.50.

**This is not due until the Board of Directors have reviewed and approved your application. You will then be contacted by the Executive Assistant with payment options.**

Please return your form via one of the following methods –

1. PO Box 835, Maitland, NSW, 2320
2. [maiwel@maiwel.com.au](mailto:maiwel@maiwel.com.au)

*Office use only below)*

I ....., a member of Mai-Wel Limited, endorse this membership application.

Signature ..... Date .....

I ....., a member of Mai-Wel Limited, second the nomination of this application for membership.

Signature ..... Date .....

Date presented to Board \_\_\_\_\_ ( ) Approved ( ) Not Approved

*Approved application receipt details below*

Receipt No. .... Amount Received .....

Date Received ..... Receipted by .....

