

Surry Hills Neighbourhood Centre

Membership Application Form

405 Crown Street
Surry Hills NSW 2010
Telephone 02-9310 2888
Facsimile 02-9318 0098
Web: www.shnc.org
ABN: 65 943 080 838



Full Name	
Postal Address	
	Postcode
Telephone (Day)	(Evening)
Email	

I hereby apply to become a member of the Surry Hills Neighbourhood Centre. In the event of my admission as a member, I agree to be bound by the rules for the time being in force.

Signature	Date
-----------	------

Annual Fee	\$1.00	Received by (signature)	Amount
Joining Fee	\$1.00		\$

My interests and skills

How I'd like to help (tick boxes)

<input type="checkbox"/> Advise on issues of local concern. <input type="checkbox"/> Assist staff in the office. <input type="checkbox"/> Help with the Surry Hills Market (monthly). <input type="checkbox"/> Help with the Surry Hills Festival (annually). <input type="checkbox"/> Work on the Management Committee.	<input type="checkbox"/> Recruit volunteers. <input type="checkbox"/> Help run programs (e.g. multicultural) <input type="checkbox"/> Help with fundraising or find sponsorship. <input type="checkbox"/> Write brochures and leaflets, help with publicity. <input type="checkbox"/> Attend community meetings and report back.
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Other

Nominator (must be a current member knowing the applicant personally)

Signature

Date

Secunder (must be a current member knowing the applicant personally)

Signature

Date

Office Use Only : Membership Approved