## **Membership** - Application

**Illawarra Aboriginal Corporation** 

## **Eligibility Criteria**

Please refer to our Consolidated Rule Book for more detail on each criteria

- Confirmation of Aboriginality
- **Proof of Identification** ٠
- Must be 18 years of age or over
- Must live in the local area

## **Applicant Details**

| Applicant Address           |                               |                    |        |
|-----------------------------|-------------------------------|--------------------|--------|
| Date of Birth               |                               | Gender             |        |
| Are you accepted as Aborigi | nal or Torres Strait Islander | in your community? | Y or N |

I wish to apply for membership of the Illawarra Aboriginal Corporation. If my application is accepted, I agree to abide by the Rules of the Corporation. I understand that I must be nominated and seconded by current members of the Illawarra Aboriginal Corporation that have been members for at least 12 months and that know me personally.

| Applying for Membership |  |  |  |  |
|-------------------------|--|--|--|--|
| Full Name and Phone     |  |  |  |  |
| Sign and Date           |  |  |  |  |

| Nominated By        |  | Phone |
|---------------------|--|-------|
| Full Name and Phone |  |       |
| Sign and Date       |  |       |

| Seconded By         |  | Phone |
|---------------------|--|-------|
| Full Name and Phone |  |       |
| Sign and Date       |  |       |

## **Office Use Only**

| Date of Board Meeting |               | Motion |  |
|-----------------------|---------------|--------|--|
| Accepted? Y or N      | Allocated No. | Second |  |
| Chairperson signature |               |        |  |

**Need Help?** Call 4228 1585 and ask for the assistance with your application

