Brunswick Neighbourhood House

APPLICATION FOR MEMBERSHIP - CO-OPERATIVES ACT 1996

Thank you for applying for membership of Brunswick Neighbourhood House. New members help us become stronger and deliver programs and services which benefit the local community.

In making your application, please be aware that Active Membership requirements set out in Part 3 of Appendix 2 of the Rules of the Co-operative include that, during a financial year, you will:

- be a participant of at least one program or service offered by the House
- volunteer in a fundraising activity or event
- attend a public event hosted or sponsored by the House
- attend one general meeting, or
- be part of a sub-committee established by the Board.

Your application for membership will be considered by the Board of the Neighbourhood House and you will be advised of the date of acceptance.

<u>Please complete the front and reverse of this form and
lodge with your $1 membership fee at the office</u>

Surname: _____ **Given Name/s**: _____

Address: _____ **Postcode**: _____

Telephone: Home _____ Mobile _____

Email: _____

Postal Address: _____

Current involvement with Brunswick Neighbourhood House:

_____

What other courses, events, or services would you like to see happening at the House:

_____

_____

_____

Please tick the areas you would like to be involved in, help, or contribute to the House (optional):

Fundraising ☐   Brochure distribution ☐
Special events ☐   Yearly Donation ☐
Promotion ☐   Working bees ☐
Newsletter ☐   Volunteer group leader/tutor ☐
Childcare Laundry Roster ☐

Other (please specify) _____

Would you like to receive mailings to your e-mail address?   **Yes** ☐   **No** ☐
(e.g., newsletters, coming events, program brochures)

Declaration:

I hereby apply to be admitted as a member of the Brunswick Neighbourhood House Cooperative Limited and in respect of such application I lodge, in accordance with the Co-operative rules, the sum of $1.00. If this application be approved and membership is offered to me, I agree to be bound by the rules of the Co-operative and the requirements set out in Part 3 of Appendix 2.

Signature of Applicant: _____   **Date**: _____

Nominating Member: _____

Signature of Nominating Member: _____   **Dat**e: _____

Office Use Only

$1 Membership Fee paid on _____   Receipt No. _____ Cash / EFT

Invoice Book Page No. _____

At: De Carle Street ☐   Garden Street ☐

Entered in Membership Register on _____

Acceptance Letter sent: _____ by email ☐   by post ☐

Membership Accepted

Signature: _____   Date: _____

Signature: _____   Date: _____
          Board Delegate