

Connecting People, Enriching Lives

APPLICATION FOR MEMBERSHIP OF AN INCORPORATED ASSOCIATION WITHERS PROGRESS ASSOCIATION INC.

l,		
(Insert AP	PLICANT'S name)	
of		
insert APPLICANT'S residential or postal addr		(2) of the Associations Incorporation Act
2015)) apply to become a member of the	above Association.	
f my application is accepted, I agree to b	e bound by the rules of the	Association.
My contact details include:		
:mail:	Phone:	
ignature:	Date:	
Rule 5(2) The application must include a	member's nomination of th	e applicant for membership.
PROPOSED:	SECONDED:	
Name: Name	2:	
ignature: Signa	ture:	
Pate: Date:		
wish to nominate to become a	Financial Member	Associate Member
NSURANCE AND PUBLIC LIABILITY:		
ndividual registration and signature are	essential for any volunteer i	nsurance claim. Please do not narticin:
n any activity if you are physically unable volunteer insurance.		
I am <u>over</u> 18 years of age.	Signature	Date
I am <u>under</u> 18 years of age.		Date
PHOTO/ MODEL RELEASE:		
grant Withers Progress Association Inc.		
Member of the Association, of myself or		_
promotional material or other media out	iets to promote the Associa	tion in perpetuity.
Yes No		

^{*}Refers to the Rules of Association for Withers Progress Association Inc.



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INFORMATION for APPLICANTS

- If your application is accepted, your name and address, as provided above, **must** be recorded in a register of members and be made available to other members, upon request, under section 53 of the *Associations Incorporation Act (2015)*.
- As a Member of Withers Progress Association Inc. (WPA) I am committing to support the group with a Membership that entitles me to access any of the activities undertaken by the group and attend any Community Meetings and the Annual General Meeting. If my Membership is accepted, I agree to all its commitments (which I can freely access) and be bound by the *Rules of WPA.
- I understand that my Membership with WPA can be terminated immediately, with no refund of fees, if I am found to be in serious breach of the Groups Rules.*
- If the obligations under the Associations Incorporation Act (2015) are not complied with the Association can be wound up.
- You can contact the Association at:

WITHERS PROGRESS ASSOCIATION INC.

PO Box 6232 South Bunbury 6230 Contact Phone: 0421 441 443 Email: wpa6230@gmail.com

• You can access or correct personal information (your name and address) by contacting the Association as indicated above.

OTHER INFORMATION

- If your application is accepted you are entitled to inspect and make a copy of the register of members under section 54 of the *Associations Incorporation Act (2015)*.
- If your application is accepted you are entitled to inspect and make a copy of the rules (constitution) of the association under section 54 (2) of the *Associations Incorporation Act*. **If your application for membership is rejected by the Committee**: If the committee rejects the application, the committee is not required to give the applicant its reasons for doing so. *Rule 6 (7)

OFFICE USE ONLY		
Membership Fee Paid:	_ (Amt) Receipt No	
Authorised by:	(Treasurer)	
Date:	Financial Year:	

^{*}Refers to the Rules of Association for Withers Progress Association Inc.