

SLOVENE ASSOCIATION
SYDNEY



SLOVENSKO DRUŠTVO
SYDNEY

A COMPANY LIMITED BY GUARANTEE
A.C.N. 000 904 754
2-10 ELIZABETH STREET,
WETHERILL PARK, N.S.W. 2164.

Telephone: (02) 9756 1658
Email: slodsyd@bigpond.com

All Correspondence to: P.O. Box 6093, Wetherill Park, N.S.W. 2164.

Application for Full Membership

I hereby make application to become a Full Member of the Slovene Association Sydney. In the event of my admission as a Full Member, I agree to be bound by the Memorandum and Articles of Association and any Rules, Regulations and By-Laws of the Club.

Surname: Mr/Mrs/Ms _____ **First name:** _____ **Initial:** _____

Date of Birth: _____ **City/ Country of birth** _____

Name of Mother: _____ **City/Country of birth** _____

Name of Father: _____ **City/Country of birth** _____

Name of Spouse (if relevant): _____ **City/Country of birth** _____

Residential address: _____

Contact details: telephone (private) _____ (Business no.) _____

Mobile: _____ **Email:** _____

Signature of applicant: _____ **Date:** _____

We, the undersigned, nominate the above applicant, who is personally known to us, for Full Membership of the Slovene Association Sydney.

Surname: _____ **Badge No.** _____ **Signature:** _____

Surname: _____ **Badge No.** _____ **Signature:** _____

OFFICE USE ONLY

Committee Meeting Date: _____ **Approval of Application?** _____

Badge No. allocated: _____ **Membership paid until:** _____

Receipt No. _____