

WODONGA CITIZENS' BAND INC.

APPLICATION FOR MEMBERSHIP

(full name of applicant)
of(address)
Telephone Contact:
Email:
Date of Birth: (required for VBL registration)
desire to become a Full/Associate ¹ member of Wodonga Citizens' Band Inc. In the event of my admission as a member, I agree to be bound by the rules and regulations of the Association for the time being in force.
As Wodonga Citizens' Band Inc. is an organization that recognises the importance of providing a child safe environment all adult members are required to sign the band's 'Adult Member's Code of Conduct' in accordance with the band's Child Protection Policy.
The annual membership fee, ensemble membership fee (if appropriate) and for adult members, a signed 'Adult Member's Code of Conduct' form accompany this application.
Signature of Applicant
If Member is under 18 years old:
Parent/Guardian Name
Signature of Parent/Guardian: Date
Parent/Guardian Contact Details:

- (a) **Full Member** A person may become a Full Member by applying for membership in accordance with the procedure established for that purpose from time to time by the Committee, subscribing to the objects of the Band and paying the annual subscription.
- (b) **Associate Member** A person may become an Associate Member by applying for membership in accordance with the procedure established for that purpose from time to time by the Committee, subscribing to the objects of the Band and paying the annual subscription but does not have voting rights under the Constitution and is not part of any ensemble within the band

The Committee shall determine whether an applicant satisfies the eligibility requirements for membership of the Band.

¹ Strike out what is not applicable.