

Henry Lawson Memorial & Literary Society Inc.

APPLICATION FORM TO BECOME A MEMBER

(Please print clearly)

I,
(Name)

of
(Address)

hereby apply to become a member of the Henry Lawson Memorial & Literary Society Inc. (A0025176D). In the event of my admission as a member, I agree to be bound by the Rules of the Association for the time being in force.

.....
(Signature of Applicant) (Email address)

..... Date: / / 20.....
(Phone number)

Please return this application form with method of payment indicated below to:

The Secretary-Treasurer
Henry Lawson Memorial & Literary Society Inc.
PO Box 429
BRIGHTON VIC 3189

ANNUAL FEE: \$25.00

- Cheque or Money Order enclosed herewith made payable to the above OR
- Visa or Mastercard payment completed on our website:
www.henrylawsonsociety.org/joining - click Pay Now

OFFICE USE ONLY:

I,

being a member of the Henry Lawson Memorial & Literary Society Inc., hereby nominate the above Applicant to become a member of the Society.

..... Date: / / 20.....
(Signature of Proposer)

I,

being a member of the Henry Lawson Memorial & Literary Society Inc., hereby second the membership of the above Applicant.

..... Date: / / 20.....
(Signature of Seconder)