

**Post:** PO Box 64, Brisbane Market, Rocklea Q 4106  
**Phone:** 07 3392 8848  
**Fax:** 07 3392 7729  
**Email:** info@jacarandahousing.com.au  
**ABN:** 30 815 638 618  
**ACN:** 140 309 888



**Jacaranda  
Housing**

## Membership Application Form

**Name:** .....

**Postal Address:** .....

**Email:** .....

**Phone Number:** .....

I, (print name) .....  
apply for membership class as per section 9.3 and 9.4 of the Jacaranda Housing Constitution as:

- Class B Membership- Interested Person
- Or
- Class C Membership- Significant Contributor

**Applicants Signature:** .....

**Date:** .....

### Office Use only:

Annual Membership Fee \$10.00 Paid Y/N

Prior Membership: Y/N

Prior Membership Conduct if applicable: .....

**Board Approval Date:** .....

**Company Secretary Signature:** .....

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### Method of Payment

- Cash
- Direct deposit details below- please provide full name as reference

Jacaranda Housing

BOQ

BSB: 124 158

Account Number: 2249 1648

**A tax invoice will be issued once payment is confirmed**