

Membership Application Form

Name:		
Address/Email:		
Phone Number:		
I, (print name)		
(b) (c)	want to become a member; support the object(s) of the Company; agree to comply with the Company's constitutior relevant class and paying the guarantee under ru agree to adhere to the company's code of condu	ıle 3 if required; and
I am applying for the Housing Constitut	the following membership class as per sections 1 ion:	1.9 and 11.10 of the Jacaranda
☐ Class	B Membership- Interested Person	
Or		
☐ Class	C Membership- Significant Contributor	
With written nom	ination by the following two Jacaranda Housing	members:
	Proposer	Seconder
Name (print):		
Contact Number	:	
Signature:		
Date:		

Note: once approved as a member, the member's personal information disclosed on the application will be included on the Register of Members, which a member can request for a prescribed purpose

following section 173 of the Corporations Act.

Membership Fee \$10.00 Paid Yes □ No □ Prior Membership: Y/N			
Prior Membership: Y/N			
Prior Membership Conduct if applicable:			
Board Approval Date:			
Company Secretary Signature:			
Member Code of Conduct issued: Yes \square			

Method of Payment

- Direct deposit details below- please provide full name as the reference
- Cash is not accepted

Jacaranda Housing

BOQ

BSB: 124 002

Account Number: 2332 0526
Tax invoice issued upon payment received.