

Warrnambool Ratepayers Association Inc

Application for membership
No. A0103129N

NAME: _____

ADDRESS: _____

COUNCIL: _____

BUSINESS: _____

PHONE: _____ MOBILE: _____

EMAIL: _____

Please print clearly

In the event of my admission to membership, I agree to be bound by the rules of the association and to work cooperatively with other members and I confirm that I am a ratepayer, resident or trader in the Warrnambool region.

Signature: _____ Date: _____

Membership fees, \$10 per annum

We will stand together to fight for the rights
of everyone in the community