

Application for membership

N A M E :
ADDRESS:
CITY:
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 confirm that I am a ratepayer, resident or trader in the Warrnambool region.
Signature: Date: Date: Membership fees, \$10 per annum
Banking details; BSB - 803-073 Account: 100037441

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

Or post cheques to Warrnambool Ratepayers Association Inc. P.O. Box 7042, Warrnambool, Victoria 3280