## **Appendix 1 Application for membership of association**

(Clause 3 (1))

## THE CENTRAL WEST WOMEN'S HEALTH CENTRE INC

Incorporated (incorporated under the Associations Incorporation Act 2009)  I,			
		Signature of applicant	Date
		I,	
		[full i	name]
		a member of the association, nominate the appl	·
Signature of proposer	Date		
I,			
[full I	name]		
a member of the association, second the nomin association.	ation of the applicant for membership of the		
Signature of seconder	Date		
Centre use			
Approved at Board Meeting: / /			
Membership fee (\$10) paid: / /			
Receipt No:			