



**Membership Application**  
**Toora and District Family History Group Inc.**  
**A0022279T**

I, \_\_\_\_\_

Postal Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Hereby apply to become a member of the above named incorporated association. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

The current annual membership fee is \$15 for a single membership.

- I enclose my annual membership fee of \$15  
 I would like to make a donation of \$ \_\_\_\_\_ (donations are tax deductible)

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

I, \_\_\_\_\_ a member of the T&DFHG Inc., nominate the applicant, for membership.

Signature of Proposer \_\_\_\_\_ Date \_\_\_\_\_

I, \_\_\_\_\_ a member of the T&DFHG Inc., second the nomination for membership.

Signature of Seconder \_\_\_\_\_ Date \_\_\_\_\_

**ALL APPLICATIONS MUST BE RECEIVED BY THE SECRETARY**

- **Forms may be scanned and emailed to** [contact@toora.org](mailto:contact@toora.org) **or posted to: The Secretary, P.O. Box 41 Toora 3962.**
- **Payments may be cash, cheque (made out to Toora & District Family History Group Inc.) or direct credit; BSB 633000 Acc # 114885858 (Please include name as reference)**