



FRIENDS OF FEDERATION WALK Inc

MEMBERSHIP APPLICATION

\$10.00 per person Ordinary Member (once-only joining fee)

Date _____

Name: _____ (signed) _____ (Full name)

Age (If under 18) _____

Postal Address _____

Phone/Email Address: _____ - _____

Return on Community Day or mail to P.O. Box 634, Main Beach, 4217 or info@federationwalk.org

Bank Details: Suncorp Account :- BSB: 484 799 Acc : 602300257 Account Name : Friends of Federation Walk. Clearly identify Payee. PLEASE RETURN MEMBERSHIP FORM

OFFICE

Nominated by _____ (signed) _____ (Full name)

Seconded by _____ (signed) _____ (Full name)



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