



COUNCIL OF INDIAN AUSTRALIANS INC

PO Box 1391, Macquarie Centre, North Ryde NSW 2113

Application for Membership

I, Mr/Mrs/Ms _____
(Family name & given names of the Applicant)

Of _____
(Address of Applicant)

_____ (City/Suburb) _____ (Post Code)

here apply to become

1. 1. Annual Member for the Financial Year ending on 30th Jun, 20__

2. Member for Life

of the Council of Indian Australians Inc, Sydney. 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.

Phone (Res): (____) _____ Phone (Work): (____) _____

Mobile: _____ E-Mail Address: _____

Signature of Applicant: _____ Date: __/__/____.

I, Mr _____
(Full Name of proposer)

a member of the association, second the applicant, who is personally known to me, for the membership of the association.

Signature of the Seconder: _____ Date: __/__/____.

I, Mr _____
(Full Name of Seconder)

a member of the association, propose the applicant, who is personally known to me, for the membership of the association.

Signature of the Proposer: _____ Date: __/__/____.

Annual Membership Fee - \$ 25.00
Membership for Life Fee - \$ 250.00

Please send your completed application with payment details to

The Secretary
Council of Indian Australians Inc
P O Box 1391, Macquarie Centre
North Ryde

Payment Options:

- By Cheque payable to Council of Indian Australians Inc
- By Bank Transfer Please visit www.cia.org.au
- Cash in person to the Treasurer

Official purpose only:

Amount Banked: \$ _____ by: _____ Date: __/__/____

Register entry made: __/__/____

Notes: