

Albany Central Office

3/90 Frederick Street

Albany Ranger Office

22 Locke Street

Bunbury Office

16 Zoe Street

Katanning Office

42 Clive Street

Narrogin Office

119 Federal Street

Application for Membership of Southern Aboriginal Corporation

Please complete all sections of this application and sign the declaration for consideration.

Applicant's Personal Details

Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other _____			
First Name:		Middle Name:		
Surname:				
Preferred Name:				
Date of Birth:		I am:	<input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Neither	

Applicant's Contact Details

Residential Address:	Street #:		Unit #	
	Street Name:			
	Suburb:			
Period of residence at above address:	Years _____		Months _____	
Postal Address: <i>If different from residential address</i>				
Mobile Phone #:		Home Phone #:		
Email Address:				
Preferred Contact:	<input type="checkbox"/> Post <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> SMS <input type="checkbox"/> Other _____			

Applicant's Family Details – please complete if known

	Mother's Family		Father's Family
Mother's Name/ Maiden Name:		Father's Name:	
Grandmother's Maiden Name:		Grandmother's Maiden Name:	
Grandfather's Name:		Grandfather's Name:	

Step Up... Stand Tall... Walk Together...

Eligibility of the Applicant

The Applicant must be:

- At least 18 years of age or over;
- A person of Aboriginal descent or a descendant of an Indigenous inhabitant of the Torres Strait Islands; and
- Residing in one of the Wards (Albany / Bunbury / Narrogin) for a period of at least 6 months continuously immediately prior to applying for membership, with an intention to reside permanently.

Declaration by the Applicant

I acknowledge that an annual fee of \$10.00 is required to maintain my membership, which is to be paid by bank transfer upon notification of my successful application, and thereafter no later than 30 June of each financial year.

I will notify the Southern Aboriginal Corporation's Contact Person or Secretary in writing of any future changes to my address or other contact details.

I hereby express my interest in becoming a member of the Southern Aboriginal Corporation ICN 232.

I agree to abide by, and be bound by, the rules of the corporation.

Applicant's Name:	
Signature of Applicant:	
Date:	

Return your completed Application for Membership

Via Post: Southern Aboriginal Corporation; PO Box 5277; ALBANY WA 6332.

Via Email: reception@sacorp.com.au

To view a copy of the rule book, or to fill this form out online go to:

<https://www.sacorp.com.au/membership>

For questions or help with filling out the form, please contact us on (08) 9842 7777.

What happens next

All fully completed applications for Membership of Southern Aboriginal Corporation are reviewed and determined by resolution at a Board of Directors meeting.

Incomplete applications will not be accepted or considered.

Applicants will be notified in writing of the Board's decision regarding their membership application. In cases where an application is declined, the Board will provide the applicant with the reasons for the refusal.

An applicant is officially recognised as a member once the membership fee has been received and receipted, and their name, address, and membership commencement date have been recorded in the register of members.

Corporation use only

Applicant's Name:		
Application received	Date:	
Application tabled at directors' meeting held on	Date:	
Directors consider applicant is eligible for membership	Yes/No	
Directors have sent notification of directors' decision to the applicant	Date:	
Membership fee paid	Date:	
Directors enter name, address and date on register of members	Date:	
Applicant's member registration number	Number:	

