

Federation of Netherlands Societies Limited

222 Waldron Rd Chester Hill 2160

ABN

WWW.DutchFederation.org.au

(Please use black pen)

MEMBERSHIP APPLICATION FORM

Mr / Mrs / Ms _____
FAMILY NAME GIVEN NAMES

ADDRESS _____

SUBURB POSTCODE

Telephone Number Home _____ Work _____ Mobile _____

Occupation _____ Date of Birth _____

Email Address _____

Is your spouse/partner becoming a member? YES / NO (Please circle)

Are you related to or of Dutch Descent? Related / Descent (Please circle)

**I have read, and if admitted as a member, agree to be bound by the memorandum and articles of association of the
"Federation Of Netherland Societies" as being in force from time to time.**

Signature of Applicant _____ Date _____

MEMBERSHIP FEES (including GST)

Single membership \$5.00pa (Inc online newsletters)

Affiliate \$60.00pa.

NOMINATION OF NEW MEMBER

We, the undersigned members, hereby nominate the above applicant for membership.

Nominators Name _____ Signature _____ Login ID _____

Seconders Name _____ Signature _____ Login ID _____

OFFICE USE ONLY

This application was accepted / declined at the Board meeting held on _____

Accepted as Single Member ☐

Affiliate MEMBER ☐

Corporate Member ☐

Signed Hon Secretary _____ Date _____

New Membership login ID **Yes/no**

Login ID _____