

MEMBERSHIP FORM



FIRST NAME	
LAST NAME	
MIN (if in jail)	
ADDRESS	
SUBURB	
STATE	
POSTCODE	
EMAIL	
PHONE NUMBER	

To become a member, you can either ask the Board to nominate you (tick the box below) or else you can be nominated by an existing NUAA member (please write their name and phone number below)

BOARD TO NOMINATE	☐ Yes I need the board to nominate ☐ I don't need board to nominate (fill below)
MEMBER NAME	
MEMBER NUMBER	

I hereby apply to become a member of the NUAA incorporated association:

APPLY	☐ In the event of my admission as a member, I agree to be bound by the constitution of the association being in force (TICK TO AGREE)
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Membership payment:

☐ I can pay the \$10	☐ Please waive the fee
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SCAN THIS CODE
TO MAKE PAYMENT



SCAN THIS CODE TO READ
OUR CONSTITUTION