

SOKOL MELBOURNE INC.
497 Queensberry Street
North Melbourne Vic 3051
A0030170P

MEMBERSHIP NOMINATION AND APPLICATION FORM

I,
(full name)

of
(address)

confirm that I am an existing financial member of the Association and hereby nominate

..... to be a member of the Association

..... /..... /.....
(signature) (date)

I,
(full name)

of
(address)

..... /..... /.....
(phone) (date of birth) (email – optional)

Hereby apply for membership of the Association and agree to abide by its Constitution and Rules at all times.

..... /..... /.....
(signature) (date)

Please send this application form to Sokol's address together with a stamped self-addressed envelope.
You will be notified within three months upon receiving the application.