

Miracle Assistance Dogs Inc.

ABN: 59 004 679 977

www.miracleassistancedogs.org.au

PO Box 2393 Green Hills NSW 2323

info@miracleassistancedogs.org.au

Application for Membership of the Association Miracle Assistance Dogs Inc.

(Incorporated under the Associations Incorporation Act 2009)

I, [full name of applicant]		
of [residential address]		
Suburb	Postcode	State
Date of Birth	Phone (preferred)	
Email address		
I hereby apply to become an Member acceptance as a Member, I agree to be Applications must be accompanied by	e bound by the Constitu	ition of the Association.
Signature of Applicant		
Date		
Nominated by:		
As a member of Miracle Assistance Dog Association.	gs Inc., I nominate the a	pplicant for Membership of the
I [full name]		
Signature of proposer		Date
As a member of Miracle Assistance Dog Membership of the Association.	_	nination of the applicant for
I [full name]		
Signature of seconder		Date

Direct Deposit payments can be made to:

Westpac - BSB 032529 Account No. 299942

(Please include your name in the payment description)



MIRACLE ASSISTANCE DOGS

Office Use Only		Office Use Only	Office Use
Membership Fee Paid			
Amount	_Date	Receipt No	Initialled
Name of Receiver (print)			
Category:			
□ Volunteer□ Student / Family□ Internal Client□ External Client			
Membership Type:			
□ Normal□ Life Member□ Honorary Member□ Concession			
Date Ratified by Board _			
Date entered on databas	se		
Membership Number			
Date letter of Notificatio	n sent to	Associate Member	