



Macarthur Community Radio Association Inc.

P.O. Box 1420 Campbelltown NSW 2560 Ph: 02 4625 2768 Fax: 02 4627 0670
Email: secretary@2mcr.org.au

Application for Membership

Title	Surname	First Name	Concession Type / Card No. / Expiry Date	
Date of Birth / /		Membership Type (tick)	Full <input type="checkbox"/>	Concession <input type="checkbox"/> (Proof required)
Home Address :				
Suburb :		State :	Postcode :	
Postal Address Leave blank if same as above.				
Suburb :		State :	Postcode :	
Contact Numbers	Home:	Work:	Mobile:	
Fax No:		Email:		
Reason for Joining (tick)	Presenter <input type="checkbox"/>	Volunteer <input type="checkbox"/>	Office Help <input type="checkbox"/>	Panel Operator <input type="checkbox"/>
Type of Show you would like to present :				
Music format : <div style="text-align: center; font-size: small;">Programmes are allocated by the Programme Committee as they become available</div>				
Please add a short bio about yourself to this application.				
Working With Children Check Number (WWC) <input style="width: 50px;" type="text"/>			I intend to apply for a WWC Number within 12 months <input type="checkbox"/>	
Next of kin / Carer Contact	Name	Relationship	1 st Contact number	2 nd Contact umber
If you have a medical condition/s you would like the station to be aware of, please list here.				
Declaration: I hereby make application to join Macarthur Community Association Incorporated and agree to abide by the Articles of Association and the Station Rules. I understand that any service given as a Member of the Association is on a voluntary basis in accordance with the Aims and the Objectives of the Association. I further agree to pay all charges and fees as authorised under the Articles and Rules of the Association. I further undertake to notify the Board of Management should any matter be likely to bring the Radio Station into disrepute." (NB <i>When your application is approved ~ You will be given all relevant documents necessary for your information as per Membership rules.</i>				
Print Name		Signature		Date / /
Membership Fees & Charges:		All fees and charges quoted are inclusive of GST		
Concession Members Conditions apply	\$ 30.00	Annual Concession fee (Proof required as per above)		
Full Membership	\$ 50.00	Annual Full Membership fee		
NOTE:- Please DO NOT SEND ANY MONEY with this Application Form. You will be advised of the Association's decision on your Membership Application and will be issued with an Invoice at that time.				
Induction : / /	Membership No. (if known)		Receipt No.	Amount: \$
Your Membership receipt must be retained as proof of payment				
Office Use Only	Date Received	Date Accepted	Date Advised	
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