



APPLICATION FOR MEMBERSHIP – INDIVIDUAL

FULL NAME OF APPLICANT: _____

RESIDENTIAL ADDRESS: _____

_____ POSTCODE: _____

PHONE: HOME: (____) _____ BUS: (____) _____

MOBILE: _____

EMAIL: _____

OCCUPATION: _____

DATE OF BIRTH: ____ / ____ / ____

I apply for membership of Cumberland Community Radio Inc as (please tick box and include payment or payment details): Cash Cheque EFT

- Individual Membership (\$22.00 per annum)
- Student / Concession / Unemployed Membership (\$11.00 per annum)

In applying for membership, I would like to become involved in:

- Community Outreach
- Marketing and Public Relations
- Administration
- Presenting a program
- The technical areas of the station
- Radio Production
- Learning all about radio
- Other: _____

Bank Details (if paying electronically) Cumberland Community Radio BSB: 112 879 Account: 057 822013 [Please include your name on the electronic deposit.] EFT Receipt No: _____
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In applying for membership of Cumberland Community Radio Inc, I agree to abide by the Rules of the Association.

Signature of Applicant: _____ Date: _____

Please return this form to:

Cumberland Community Radio Inc
PO Box 977
BAIULKHAM HILLS NSW 1755 OR Email: mail@2ccrfm.com

Cumberland Community Radio Inc Receipt No:
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