



Friends of the Porongurup Range Inc
ABN 23 239 880 019

PO Box 514
Mt Barker WA 6324

www.porongurup.org.au

APPLICATION FOR MEMBERSHIP

Name _____

Name _____

Address _____

Postal address (if applicable) _____

Email address _____

Email address _____

Phone _____ mobile _____

Phone _____ mobile _____

Annual membership: Individual: \$10.00 - Family: \$20.00 (including children under 18 yrs)

An invoice will be sent to you after the application has been processed.

I/we agree to abide by Models Rules/Constitution of the Friends of the Porongurup Range Inc

Signature of applicant _____ date _____

Signature of applicant _____ date _____

For office use only

Two existing members of FOPR to complete section below:

I, _____, as a Member of the Friends of the Porongurup Range, Inc. nominate
the applicant/s for membership of the Association.

Signature of Member _____ date _____

Signature of seconder _____ date _____

Please return this form to Friends of the Porongurup Range, P O Box 514, Mt Barker WA 6324 or

Email: friends@porongurup.org.au