

# ORGANISATIONAL MEMBERSHIP



natsiwa

NATIONAL ABORIGINAL AND  
TORRES STRAIT ISLANDER WOMEN'S ALLIANCE

## APPLICATION FORM

### NATIONAL ABORIGINAL & TORRES STRAIT ISLANDER WOMEN'S ALLIANCE (INDIGENOUS CORPORATION)

\_\_\_\_\_

*(Name of Organisation)*

of

\_\_\_\_\_

*(Address of Organisation)*

\_\_\_\_\_

*(Applicants ABN)*

\_\_\_\_\_

*(Applicants phone)*

\_\_\_\_\_

*(Applicants email)*

I hereby apply for membership of the

### NATIONAL ABORIGINAL & TORRES STRAIT ISLANDER WOMEN'S ALLIANCE (INDIGENOUS CORPORATION)

On behalf of the organisation I declare that the organisation is eligible for membership under **Rule 5.2** (see below) and that the organisation is willing to be bound by the rules of the corporation.

The organisation nominates the following person to be their representative in relation to NATSIWA business.

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Date: \_\_\_\_\_

### BOARD MEMBER/MANAGER'S SIGNATURE

[www.natsiwa.org.au](http://www.natsiwa.org.au)