Wara Wayingga

Tennyson Dunes Group Inc - Membership Form

Personal Details:				
Last Name:				
First Name:				
Address:				
		Post	Code	
Contact Details:				
Mobile Phone:	Home	Phone:		
Email:				
Preferred method of contact:	Mobile:	Email:	Home Phone:	
Membership:				
New Membership: Renewal Me	embership:			
Able to participate in Dune wor	rkdays:			
Thursday (1 st Thursday of month)	Yes:	No:		
Sunday (3 rd Sunday of month)	Yes:	No:		
In case of emergency please co	ntact:			
Contact Number 1				
Name:				
Relationship (eg son)	Ph	ione:		
Contact Number 2				
Name:				
Relationship (eg son)	Ph	one:		
Interests, skills or knowledge th	nat would be u	seful to the	group:	

Tennyson Dunes Group Inc Membership Form

Membership Conditions:

1. 5	Support t	he objects	of the	Tennyson Dunes	Group Inc.
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- 2. Complete new membership form.
- 3. Complete membership renewal form yearly.
- 4. Volunteer for a minimum of 8 hours a year.

I understand that if I do not meet these membership conditions that I will be ineligible to vote at Tennyson Dune Group Inc. meetings.

Name:	Date:	
Signature:		

