

SISTER CITIES AUSTRALIA INC.

APPLICATION FOR CORPORATE MEMBERSHIP

Name of Council/Association/Organisation:
Name of person making this application:
Address:
Telephone:
Email Address:
Contact person details:
List Sister City Affiliation/s (City and Country) and date Agreement was signed:
Signed:
Signed:
Signed:
Signed:
CORPORATE MEMBERSHIP (Councils/Associations/Organisations)
Five Hundred Dollars (\$500.00) per year.
There is no amount of GST included in the membership fee.
Payment may be made by Direct Deposit to:
Account Number: 0080 2208 Account name: Sister Cities Australia Incorporated Commonwealth Bank of Australia - Bankstown Branch
or
Cheques made payable to: Sister Cities Australia Inc., and forwarded to:
National Treasurer Sister Cities Australia Inc. P.O. Box 914 ROCKINGHAM WA 6968
Signed: Date:
Position with Council/Association/Organisation: