



Manjimup Amateur Basketball Association Inc
NON-PLAYING MEMBERSHIP APPLICATION

Please complete this form to apply to become a member of the Association.

PAYMENT MUST BE MADE WITH APPLICATION

| | | | |
|---|--|----------------|---------------|
| APPLICATION DATE: | | | |
| Full Name: | | Gender: | Male / Female |
| Date of Birth: | | Contact | |
| Address: | | | |
| | | | |
| Email: | | | |
| I wish to join the Manjimup Amateur Basketball Association as a: | | | |
| NON-PLAYING MEMBERSHIP | | | |
| (Membership fee of \$25.00 payable on application). If your application is unsuccessful, you will be contacted to arrange a refund. | | | |
| Electronic Funds Transfer: | | | |
| Account Name: Manjimup Amateur Basketball Assoc Bank: Bankwest | | | |
| BSB: 306 020 Account No: 4175742 | | | |
| and I declare that: | | | |
| 1. I have read the Association's Constitution and Bylaws (which are available on the Associations website at http://manjimup.basketball.net.au) and agree at all times to abide by them and any other obligations established in accordance with them and support the purposes of the Association. | | | |
| 2. I have not been un-financial and/or expelled from any other Association. | | | |
| SIGNED: | | | |

Application and remittance advice to be emailed to info@manjimupbasketball.com.au