## APPLICATION FOR \*BAND/BRANCH MEMBERSHIP

## of

## THE BAND ASSOCIATION OF NEW SOUTH WALES INC. (ABN 40 507 297 766)

The	
*Band/Branch	
(Full name of applic	cant Band or Branch)
of	
(Postal Addre	ss)
hereby applies to become a member of the Band Association of New South Wales Inc.	
In the event of the *Band/Branch being admitted as a member of the Association it is agreed that we will abide by the Constitution and By-laws of the Association for the time being in force.	
Registration vouchers (Appendix $1(i)$ ) are attached for Individual members where required.	
(Name of *Band/Branch Secretary)	(Signature)
	(Date)
Secretary's postal address	
Secretary's telephone contact	Secretary's email contact
*Band/Branch website (where available)	
* Delete whichever is not required.	