

Eurobodalla Access Radio

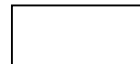


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WORKING TOGETHER FOR OUR COMMUNITY
Since 1981



Application for Membership

Title: _____ Surname: _____ First Name: _____
(Please Print)

Organisation: _____ Contact Name: _____

Street: _____ Suburb: _____ Postcode: _____

Home Ph: _____ Mobile: _____

Work Ph: _____ Email: _____

- I hereby apply to be a member of Eurobodalla Access Radio Inc.
- Upon acceptance of my application I agree to be bound by the Articles of the Association, currently in force and the constitution of the Association.

Signed: _____

Date: _____

Type of Membership

Single: * \$60 Concession: * \$40 Business: \$90
(Includes Presenters/Volunteers) (Concession Card Holder Only)

Community Organisation: \$50 School Children Under 15 years: \$10

Associate Member (Non-voting): \$20

*Volunteer Members who contribute 52 hours a year at the station over the course of the financial year and who attend the Annual General Meeting are entitled to \$20 reduction in fees after the first year.