



APPLICATION FOR INDIVIDUAL MEMBERSHIP

PLEASE PRINT CLEARLY

Surname: _____ First name: _____
 Postal address: _____
 Email address: _____
 Phone (home): _____ Phone (work): _____
 Phone (mobile): _____

I am / am not over 18 years of age. Date of birth (if under 18): _____
 (Please circle whichever is applicable)

I am interested in becoming involved in the following areas at 2RRR:

Programming Administration Technical
 Publicity Finance Other (please specify): _____

I hereby apply to be admitted as a member of Ryde Regional Radio Co-Operative Limited and to be allotted the amount of shares set out below. Total payment amount entered below accompanies this application form. If this application is approved and the shares allotted to me, I agree to be bound by the *Rules of the Co-operative*, and to pay all charges required by the Rules registered in accordance with the Co-operative Act. Approval of the application does not guarantee airtime for approved members.

Signature _____ Date of application: _____

FEES

Annual Membership Fee (including GST & payable in July each year)	\$55.00
Share Capital - 5 Shares @ \$2.00 each	\$10.00
Additional Shares @ \$2.00 each	\$
TOTAL AMOUNT (please fill in amount)	\$

(Tick one) I am paying by: Cash Cheque Money Order
 (Tick one and fill in card details) Visa Mastercard **Bank transfer to 2RRR** BSB: 062169 Account No: 28003447

Name on card: _____ Expiry date: _____
 Signature: _____

PLEASE NOTE Minimum holding is 5 shares. Maximum holding is 5000 shares. Membership Fee is payable now, and annually on 1st July. Payment must accompany this application. Cheques payable to *Ryde Regional Radio Co-Operative Limited*, PO Box 644 Gladesville 1675. This form is for individual membership only. Applications for organisations are available on request.

STATION MANAGEMENT USE ONLY

Acknowledgement letter/receipt sent	Receipt number: yes <input type="checkbox"/> no <input type="checkbox"/>	date: _____	initials: _____
Accepted by the Board	yes <input type="checkbox"/> no <input type="checkbox"/>	date: _____	initials: _____
Added to membership database/email/newsletter	yes <input type="checkbox"/> no <input type="checkbox"/>	date: _____	initials: _____
		Added to share register	Y <input type="checkbox"/> N <input type="checkbox"/>