

**Barrington Gloucester Stroud Preservation Alliance Inc.**

**Membership Application Form**

( Annual Membership Fee \$10)

Due 01 July

Application is hereby made for membership of the  
*Barrington-Gloucester-Stroud Preservation Alliance Inc*

**FULL NAME:** Surname .....

Given Name: .....

**ADDRESS:** .....

..... **Postcode:** .....

**Date of Birth** (if under 18) .....

**TELEPHONE:** Mobile: ..... **Home:** ..... **Business:** .....

**E-MAIL ADDRESS:** .....

I agree to be bound by the rules of the incorporated association for the time being in force.

Applicant's Signature: ..... Date: .....

(Note: All information provided will be treated as confidential for use by the Alliance and its associated groups and will not be divulged to a third party)

**PROPOSER:** [Print Name]: .....

**SIGNATURE of PROPOSER:** .....

**SECONDER:** [Print Name]: .....

**SIGNATURE of SECONDER:** .....

*Please forward completed form, together with annual fee of \$10 to:*

The Secretary  
Barrington-Gloucester-Stroud Preservation Alliance Inc  
PO Box 174  
Gloucester NSW 2422  
(Receipts will not be mailed out unless specifically requested)

[Optional]

I have qualifications/experience/interest in the following areas which may be of help to the Alliance:

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