**MUTITJULU COMMUNITY ABORIGINAL CORPORATION**

**ICN: 4611**

**Application for membership**

I,…………………………………………………………… (full name of applicant)

of……………………………………………………… (address)

 Mutitjulu Community via YULARA NT. 0872

Apply for membership of the Mutitjulu Community Aboriginal Corporation.

I declare that I am eligible for membership.

I am at least 18 years of age; and

I am an Aboriginal person normally and permanently resident in the Mutitjulu Community and have been for at least 12 months.

…………………………………………………………… …………………………

(Signature of applicant) (date)

Office use only:

|  |  |
| --- | --- |
| Application tabled at Directors meeting: | Date: |
| Directors confirmed applicant is eligible for membership: | Yes:No: |
| Application approved:  | Yes:No: |
| Entered on register of members | Date: |