



ABORIGINAL LEGAL RIGHTS MOVEMENT (ALRM)

MEMBERSHIP APPLICATION FORM

I hereby apply for membership of the Aboriginal Legal Rights Movement

I declare that I am eligible for membership under Article 4.1 of the Constitution and I am willing to be bound by the Aboriginal Legal Rights Movement Constitution

I understand that my membership is valid until I cease to become a member in accordance with Article 4.10 of the Constitution. A copy of the Constitution can be viewed at the Company's registered office address, 321-325 King William Street, Adelaide, South Australia, 5000

And

As the Company is a public company limited by guarantee, I agree to contribute to the Company's property an amount not exceeding \$1 if it is wound up during my period of membership, or within one year of me ceasing to be a member.

INDIVIDUAL MEMBERSHIP ONLY:

ALRM Constitution - Membership - 4.1(a) page 12 - An individual may apply for membership of ALRM if the person is an Aboriginal or Torres Strait islander over the age of 16 years and a resident of South Australia on a permanent basis (principal place of residence is within SA)

Name

Of

DOB / / Phone _____ Email

ORGANISATIONAL MEMBERSHIP ONLY:

ALRM Constitution - Membership - 4.1(b) page 12 - An entity may become a member if it is approved by, and nominates a representative that is approved by, a majority of the Directors

Name of Organisation:

Name of Nominated Representative:

Signed:

Date

Confirmation of Aboriginality:

Aboriginality/Torres Strait Islander confirmation verified by:

Print Name Signature

For ALRM Office use only:-

Application tabled at Directors' meeting held	Date:
Directors confirmed Applicant is eligible for membership	Yes/No:
Entered on Register of Members	Date:

Date:

Signature Chairperson: