McDougall Farm Community Garden (Inc.) MEMBERSHIP APPLICATION

Personal Details			
Surname:	First Name:	Title:	
Residential Street Address:			
Suburb:	Post Code:	Year of Birth:	
Mobile:	Email:		
Emergency Contact			
Relationship to you:	Full Name:		
Contact Number 1:	Contact Number 2:		
Membership			
Type of membership (please tick one): 🗖 Single (\$50) 🗖 Family (\$50)			
If family, please complete the following:			
Full Name:	Year of Birth:	Relationship to you:	
Full Name:	Year of Birth:	Relationship to you:	
Full Name:	Year of Birth:	Relationship to you:	
Full Name:	Year of Birth:	Relationship to you:	
Volunteering			
1. What activities could you like to be involved with at the Garden? Administration			
☐ Children's Activities ☐ Cooking ☐ Compost ☐ Fund Raising ☐ Gardening			
☐ Newsletters ☐ Nursery ☐ Pro	motion and Publicity	☐ Workshop Facilitation	
☐ Worm Farm ☐ Other (please describe):			
2. What skills, knowledge or experience can you contribute to the Garden?			
3. What skills, knowledge or experience do you wish to gain at the Garden?			
4. What days and times are you most likely to be available for the Garden?			
□ Tuesday AM □ Thursday AM □ Saturday AM			

Notification of Events			
Would you like to receive notification of events at the Garden? Yes No			
If yes, please indicate how: Facebook Website Newsletter Text Message			
☐ Garden Noticeboard ☐ Other (please state):			
Privacy Commitment			
The information you have disclosed on this form other than your name is restricted to committee members only. No one outside the Garden is given access to your personal details without your permission.			
Agreement			
On being accepted as a member of McDougall Farm Community Garden (Inc.) I agree to:			
 Abide by the Rules and Code of Conduct of McDougall Farm Community Garden (Inc.), and Ensure that I have adequate water, clothing, sun protection and footwear for each Garden activity. 			
Signature: Date:/	_		
Payment details			
☐ Cash ☐ Direct Credit to McDougall Farm Community Garden bank details			
Bank: ANZ BSB: 016-452 Account No: 1859-17199 Reference: Your Full Name			
Please note no responsibility will be taken for funds deposited that are not identifiable.			
Submission of Application			
Mail: Post completed application addressed to the Chairperson.			
McDougall Farm Community Garden (Inc.) PO Box 256 COMO, WA 6952			
Email: Scan a copy of the completed application to: mcdougalfarmcg@gmail.com			
Please attention email to the 'Chairperson – Membership Application' in the Subject line.			
Administrative Use:			
Administrative Use:			
Administrative Use: Amount-\$ Bank Date Received Expiry Date			