



Coolum and North Shore Coast Care

157 Warran Rd,
 Yaroomba 4573
 Ph 07 54739322
 www.coolumcoastcare.org.au

Membership Application Form

1. Applicant details

Name Phone

Address Mobile

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Email

Have you registered with the Sunshine Coast Council (SCC) as a volunteer? YES/NO
 Have you paid your \$10 annual fee to Coolum and North Shore Coast Care by direct deposit? YES/NO
 Is the \$10 enclosed with this form? YES/NO

2. Areas of interest (please tick)

Community conservation, planting and weeding:	<input type="checkbox"/>	Coolum Beach	<input type="checkbox"/>	Marcoola	<input type="checkbox"/>
	<input type="checkbox"/>	Lions Park Watercourse	<input type="checkbox"/>	Marcoola North	<input type="checkbox"/>
	<input type="checkbox"/>	Yaroomba	<input type="checkbox"/>	Mudjimba	<input type="checkbox"/>
Coolum Community Native Nursery	<input type="checkbox"/>	Social events – planning, organising, attending	<input type="checkbox"/>	Education and awareness – school groups, public events	<input type="checkbox"/>
Community group organisation, planning	<input type="checkbox"/>	Environmental advocacy	<input type="checkbox"/>	Administration, web design, social networking	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

I apply to be an ordinary member of Coolum District Coast Care Group Inc.
 I declare that I am over eighteen years of age. I agree to abide by the rules of the association.

Applicant's signature Date

Member proposer Signature

Seconder Signature

Approved by Signature

Position Date

Please return this form to: **Coolum and North Shore Coast Care**
 157 Warran Road
 Yaroomba Qld 4573

Bank details: **National Australia Bank**
 Account Name: **Coolum District Coast Care Group**
 BSB: **084 620**
 Account Number: **52931 2346**

If paying by electronic funds transfer or directly into the account, be sure to include your name as the payment reference.