



**GOLDEN MOUNT FESTIVAL ASSOCIATION
MOUNT MORGAN INCORPORATED**

MEMBERSHIP APPLICATION

www.goldenmountfestival.org.au
goldenmountfestival@gmail.com

Please complete and return this form to the secretary.

I, _____ (Financial member)

Propose and I _____ (Financial member) second

That we accept _____ application for membership.

Proposer's Signature

Seconder's Signature

Name: _____ Address: _____

Phone Number: _____

Email: _____

Do you have a Positive Notice Blue Card? Yes/NO If Yes, Blue Card No. _____

I Acknowledge that if Accepted my membership will be pending a criminal history check (we are only checking for fraud and violence and it is kept in confidence) and obtaining a Positive Notice Blue Card (for working with children).

The Golden Mount Festival has Public Liability Insurance of \$20,000,000.

I agree to be bound by the constitution of the Golden Mount Festival Association- Mount Morgan Incorporated and by all valid resolutions passed by the Golden Mount Festival Association- Mount Morgan Incorporated.

Signature: _____ Date: ____/____/____

OFFICE USE ONLY

Date Received: ____/____/____

Date Accepted: ____/____/____

Secretary's Signature: _____