



PO Box 4332, Darwin NT 0801
 Email: dance@topendcalisthenics.org.au

SOCIAL MEMBERSHIP APPLICATION

FEE: \$1.00

I, _____ hereby apply for membership of Top End Calisthenics Club Inc and agree to abide by the Constitution and all other rules of the Northern Territory Callisthenic Association Incorporated.

Name (Surname)	
First Name:	
Residential Address:
Postal Address:	
EMAIL	
Mobile Ph:	
I have a child participating?	Yes/No: If yes, what class (circle) Tinies/Future Stars/Sub-Juniors/Juniors/Inters Located at: The Tecci Committee are always keen to have new people come on board and particularly if they can offer some skills that would assist in the administration of the sport and the club. Please advise if you have an appropriate skill that you would be happy to volunteer.

All volunteers at the club must be a social member.

Acceptance of this application shall be subject to a vote of the Top End Committee at the next scheduled meeting after the Secretary receives the application. The Committee may accept or reject the application at its absolute discretion.

Signed: _____

Date: _____

Acceptance of Application.....at Committee Meeting Held / /

(Executive Member to sign)