

MEMBERSHIP FORM

I, _____ (your name)

of _____ (your address)

Phone _____ Email _____

wish to become a financial member of the Carine Primary School P&C Association Inc. by paying the annual membership fee of **\$1.00**.

Child's Name	Year	Room Number

<input type="checkbox"/>	I understand that P&C Minutes of Meetings will be made available on the school website after they have been accepted at the following General Meeting.
<input type="checkbox"/>	I understand that my membership is current until the next AGM.
<input type="checkbox"/>	I agree to abide by the P&C Constitution (Association rules) and P&C Code of Conduct. Both are available on the P&C tab of the Carine PS website.
<input type="checkbox"/>	I understand that as a financial member, I am entitled to vote at P&C meetings.

Signed: _____ (Member) Date: _____

<i>For completion by P&C Secretary</i>			
Fee received by:		Signed:	
Entered into members register on:			