P&C MEMBERSHIP FORM

Please return to your P&C Secretary

<u>l,</u>	(your name),
Of	
	(your address)
Phone	Mobile
Email	, wish to become a financial member of
	P&C Association Inc.
by paying the annual members	hip fee of
☐ I understand that my annua	al membership is current until the next AGM
☐ I agree to abide by the P&C	C Constitution (Association rules) and P&C Code of Conduct
Signed	(Member)
SECRETARY'S USE ONLY: Fee paid: Signed Date:	(Secretary)
Receipt Number:	
	(For the member's records)
2	024 P&C MEMBERSHIP RECEIPT
Received from	(members name)
Amount paid	(membership fee)
Being Annual Membership fee	of P&C Association Inc.
Signed	(Secretary on behalf of Treasurer)
Date	
Receipt Number:	