

MEMBERSHIP APPLICATION FORM

Surname	ne First Name				
Address					
Telephone (home)	(work)	(r	nobile)		
Email Address					
The applicant hereby acknowly the conditions on the re		understood an	d agrees to	be governed	
Signature of Applicant					
To be completed by curren					
<u>Proposer</u>					
Surname	First Name				
Address					
The proposer acknowledges Applicant to be a fit and propose Association.					
Signature		Date	1 .	<u>/</u>	
<u>Seconder</u>					
Surname	First Name				
Address					
The seconder acknowledges Applicant to be a fit and property Association.		• •			
Signature		Date	1 1	<u>/</u>	
Office use only					
This nomination was received on	// and accep	ted at the Meeting	dated/_	/	
Signed	(Returning C	Officer or Chairpe	erson)		

MEMBERSHIP INFORMATION

By becoming a member of Eastcoast Housing Association it entitles you to:

- Have voting rights if a board election is conducted.
- Be able to nominate other members to go on the board.
- As a member you may be nominated to become a director on the board of Eastcoast Housing Association.

TERMS AND CONDITIONS

- 1. The applicant shall at all times be subject to and abide by the provisions set out in the Memorandum of Association and Articles of Association of Eastcoast Housing Association.
- 2. Upon returning your application, please enclose \$1.00
- 3. In the event that Eastcoast Housing Association ceases service then the applicant may be liable for up to a maximum amount of \$100.00 while he/she is a member, or within one year of finalization of membership, for payment of existing debts and liabilities associated with the end of service.