

Elliott Heads State School Parents and Citizens' Association

Application for Membership

Please complete and return this form to the school office or
bring to the Annual General Meeting

Name:	
Address:	
Phone:	Home:
	Work:
Email	
New Membership	Yes / No (circle one)
Renewal Membership	Yes / No (circle one)

I agree to be bound by the constitution of the P&C and by all valid resolutions passed by the Association

Signature:	
Date:	/ /

P&C USE ONLY	
Date received:	
Date accepted:	
Secretary's signature:	