

# Aboriginal Health and Medical Research Council of New South Wales



## Ordinary Membership Application

### Part A

We the undersigned, as duly elected representatives of an Aboriginal community controlled organisation, as defined in the AH&MRC Constitution, do hereby apply for Ordinary Membership to the *Aboriginal Health & Medical Research Council of New South Wales*.

We enclose as copy of our Certificate of Incorporation together with the latest official copy of our registered Constitution.

We acknowledge that this application will be processed by the AH&MRC Secretariat and evaluated by the Board prior to consideration by the Membership of the Council at a General Meeting.

Name of Organisation:.....

Act of Incorporation: .....Date of Incorporation: .....

Name: .....Name:.....

Signature .....Signature:.....

Position.....Position:.....

Date: .....Date:.....

# *Aboriginal Health and Medical Research Council of New South Wales*



## **Part B**

### **Details of the Organisation**

**Name of Organisation:** .....

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**Address:** .....

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**Postal Address:** .....

**Telephone:** ..... **Fax:** .....

**Chairperson's Name:**..... **Phone:**.....

**Officer in Charge:** .....

**Title or Position:** .....

### **Management Committee or Board of Directors:**

#### **Names of Board Members**

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#### **Please enclose:**

1. Copy of Certificate of Incorporation.
2. Copy of Organisation's Latest Registered Constitution

**Part C**

**Brief Description of Service Provided or Intended Service**  
(Please attach additional pages if insufficient space available)

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**Statement of Objectives and/or Intentions**  
(Please attach additional pages if insufficient space available)

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**Nominated by AH&MRC Director for the Respective Region**

Name of AH&MRC Region:.....

Name of Director:.....Signature:.....

**Seconded by Nearest ACCHS Member Organisation**

Name of ACCHS:.....

Name of Person:.....

Signature:..... Position:.....

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