



Cloncurry Justice Association Inc.

APPLICATION FOR NEW MEMBERSHIP

Date of Application

Name in Full

Address

Phone Number

Email Address

I, _____ wish to apply for membership with the Cloncurry Justice Association Inc.

Signature of Applicant

Board Use Only

We the undersigned, _____ and _____,
members of the Cloncurry Justice Association Inc hereby nominate, _____ for
membership of the Non-Statutory Community Justice Group.

Name

Position

Signature

Date

Name

Position

Signature

Date

| | | | | | |
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