



COFFS COAST COMMUNITY RADIO INC.

ABN 60 508 049 077

For the Community – By the Community

APPLICATION FOR MEMBERSHIP

I
(Full name of applicant)

of
(address)

hereby apply to become a member of the above-mentioned incorporated Association.

In the event of my admission as a member, Coffs Coast Community Radio Incorporated,
I agree to be bound by the Rules of the Association for the time being in force.

MEMBERSHIP FEE \$15 per annum (including GST)

Occupation

Tel. No. Fax or Email

Applicants signature

Date.....

OPTIONAL

Particular interest in joining the Association : (eg. Music, programming, announcing)

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Have you had any previous experience in Radio Broadcasting ?

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Address: P.O. Box 2028, Coffs Harbour, NSW 2450
Tel: (02) 6652 1071 Fax : (02) 6652 8881 Email: Office@2airfm.com.au
Website : www.2airfm.com.au