

FORUM MEMBER APPLICATION FORM

Organisation Name:	
Street Address:	
Funding Contact:	
Phone:	Email:
Organisation Contact:	
Position:	Email:
Phone:	Charities Number: CC.....
How Long has organisation been running:	Incorporated Society Number:
GST Registered: Y / N	GST Number:
What is your Organisations purpose/Vision:	
In which regions do you operate:	

Form to be completed and sent to our secretary:

disabilitycommunitytrust4@gmail.com

Attach copy of your most recent financial accounts.