



ACN 006 107 133

K. I. C. C.
Knox Italian Community Club Inc.
(Italia Victoria Club)
Next Generation S.C

99 Karoo Road, Rowville, 3178 Telephone: (03) 9764 2868 Fax: (03) 9764 9743



APPLICATION FOR NEW MEMBERS

Surname _____ Given Names _____

Name of Spouse/Partner _____

Address _____

Post Code _____

Phone Home _____ Work _____ Mobile _____

Email _____

Membership Fees

Family \$55.00 Pens \$27.50 Single \$16.50

To the Secretary,

I/We wish to become a Family/Single/Junior member/s of the Knox Italian Community Club Inc.

If elected I/we hereby agree to abide by the Club's Memorandum and Articles of Association and by-laws.

I/We also agree to abide to any decisions of the Club or the Executive Committee and if any time I/we shall be suspended or expelled from Membership.

I/We will accept the decision and not take any legal action against the Club or any member thereof.

I/We also agree to abide by the Club's Code of Conduct which reflects the highest standards of public behaviour and the expectations of the Club and administration. The Club is under no obligation to accept applicants as members, and past behaviour may be taken into account when an application for membership is received.

Signature of Applicant/s _____

Proposers Signature _____ Membership No _____

Dated this _____ day of _____ Year _____