

Expression of Interest in Membership of the Proposed Karri Karrak Aboriginal Corporation

A person who is eligible to apply for membership must be an individual who is at least 18 years of age and a Noongar person.

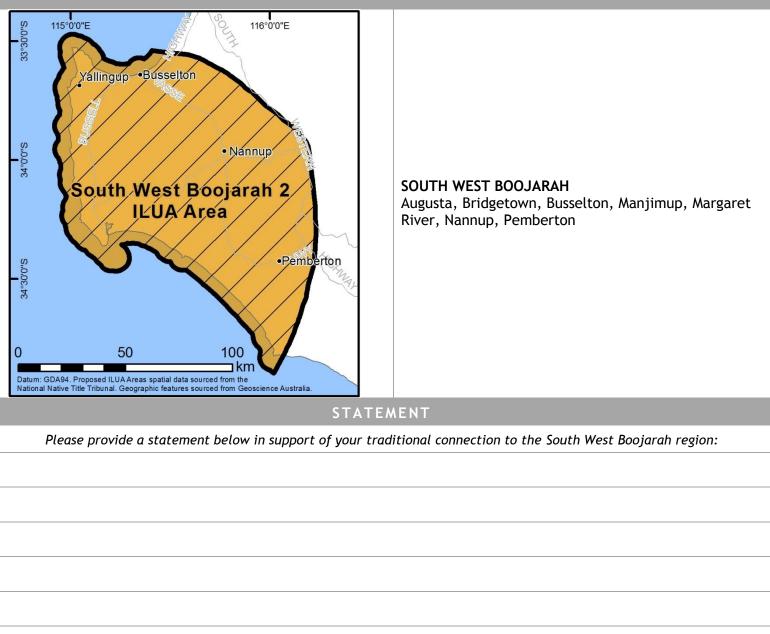
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Mr 🗌	Surr	name									Date of birth				
Mrs Mrs Ms Miss	Firs	t name						Middle	name/s						
mi35	Pret	ferred													
		-				С	ONTACT	DET	AILS						
Home add	ress							Postal address							
Suburb/Town									Suburb/Town						
State				Postcode			State				Postcode				
Mobile phone					Home phone					Work phone					
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method of contact		Email 🗆					Phone				Post				
			(please pl	rovia	de as muc	h de	FAMILY I etail as pos			ort	of your	application)			
Surname											G	iven name/s			
Mother's maiden na	ame														
Mother's mothe maiden name		er's													
Mother's father's name															
Father's name															
Father's mothe maiden name		r's													
Father's father's n	ame														
							DECLAR	ATIC	N						

I hereby express my interest in becoming a member of the Proposed South West Boojarah Regional Corporation. I agree to abide by, and be bound by, the Rules of the Corporation.

Signed:

Date:

A guide to towns located in the region



PLEASE ENSURE YOU HAVE COMPLETED ALL SECTIONS ON BOTH PAGES

PLEASE NOTIFY SWALSC IF YOU CHANGE YOUR ADDRESS An acknowledgement letter will be forwarded to you upon receipt of your application.

RETURN THIS FORM TO:							
South West Aboriginal Land and Sea Council							
PO Box 585							
CANNINGTON WA 6987							

DIRECT ENQUIRIES TO: Reception (08) 9358 7400 or freecall 1800 617 617