



Member Nomination Form

I,		
	[Name]	
Of		
	[Address]	
	bound by the rules of Holb	dcare. In the event of my admission as a member, rook Landcare, and as such, amendments are mad
	[Signature of Applicant]	[Date]
Your contact staff.	ct details will be entered int	to HLN's member database to be managed by HL
Postal addre	ess (if different from above):	
E-mail addre	ess:	
Phone:		Mobile:
	LE, PLEASE HAVE THIS SI N TO THE OFFICE FOR CO	ECTION COMPLETED BY AN EXISTING MEMBER
Current HL	N Member 1:	
I the applican		a member of Holbrook Landcare, nominate to me, for membership of Holbrook Landcare.
	[Signature]	[Date]
Current HL	N Member 2:	
		a member of Holbrook Landcare, nominate to me, for membership of Holbrook Landcare.
	[Signature]	[Date]

A separate NOMINATION FORM is required by each person applying for membership – regardless of membership type. This is a legal requirement and is only required once on joining.