

APPLICATION FOR MEMBERSHIP

WORLD CONFERENCE OF RELIGIONS FOR PEACE, AUSTRALIA INC.

P.O. Box 1893, Carlton, Vic 3053

APPLICATION FOR MEMBERSHIP

Family name of applicant.....

First name(s) Title

Address.....

..... Postcode.....

Telephone: Home..... Business..... Mobile.....

Fax..... E-mail.....

My Religion/Denomination

My Occupation

Please list relevant positions held, with organisations' names

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In event of admission as a Member, I agree to be bound by the rules of the Association for the time being in force.

Signature of ApplicantDate

SUPPORT FOR THIS APPLICATION

I,, a Member of Religions for Peace Australia, nominate the Applicant, who is personally known to me, for Membership in Religions for Peace Australia.

SignedDate