



ABN No: 29.578.855.634

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**SISTER CITIES AUSTRALIA INC.
APPLICATION FOR MEMBERSHIP**

Name of person making this application:

.....

Council/Association/Organisation:

.....

Address:

..... Post Code:

Business Telephone:

Business Fax:

Email Address:

List Sister City Affiliation/s (City and Country) and date Agreement was signed:

.....

.....

(please tick appropriate box below)

CORPORATE MEMBERSHIP (Councils/Associations/Organisations)

Five Hundred & Fifty Dollars (\$550.00 a year) incl. GST

INDIVIDUAL MEMBERSHIP

Fifty Five Dollars a year (\$55.00 a year) incl. GST

How are you involved in a sister city movement?

.....

YOUTH MEMBERSHIP(16 – 23 years) – No Charge

Please make cheques payable to: Sister Cities Australia and send to:

**National Treasurer
Sister Cities Australia Inc.
P.O. Box 142
NEW LAMBTON NSW 2305**

Signed: Date:

Position with Council/Association/Organisation: