

Application for Membership — Individual



Signature required. This form must be printed and physically signed by the applicant.

Applicant details

FIRST NAME

LAST NAME

ADDRESS

DATE OF BIRTH

EMAIL ADDRESS

PREFERRED PHONE NUMBER

Application and eligibility declaration

I apply for membership of Wook-koo Aboriginal Corporation. I declare that I am eligible to be a member under the corporation rule book and that I am 15 years of age or older.

Descent and identification details

DESCENT OPTIONS

☐ Aboriginal ☐ Torres Strait Islander ☐ Neither ☐ Not sure

IF ABORIGINAL DESCENT, DO YOU IDENTIFY AS ABORIGINAL?

☐ Yes ☐ No ☐ Not sure

ARE YOU A LINEAL / BLOOD DESCENDANT OF ALICE HUTCHINSON THOMSEN?

☐ Yes ☐ No

DESCRIBE YOUR DESCENDANT RELATIONSHIP TO ALICE HUTCHINSON THOMSEN

If not a lineal / blood descendant

If you are not a lineal / blood descendant, provide details of the family member who is a descendant.

NAME OF FAMILY MEMBER

RELATIONSHIP TO THAT PERSON

BEST CONTACT DETAILS FOR THAT PERSON

Applicant signature

SIGNATURE OF APPLICANT

DATE

Corporation use only

PROCESSING STEP	DATE	YES	NO	NOTES
Application received				
Application tabled at directors' meeting				
Directors consider applicant is eligible for membership				
Directors approve the application				
If approved, new member's details added to register of members				
Family Group is clear				
Applicant notified of directors' decision				

Returning this form

Please print and physically sign this form. Once signed, scan or photograph the completed form and email it to Wook-koo Aboriginal Corporation at mail@wook-koo.com.au.