

# CHELSEA HEIGHTS COMMUNITY CENTRE MEMBERSHIP APPLICATION

**What does it mean to be a member of Chelsea Heights Community Centre?**

**Your membership raises our profile giving us a strong voice, which helps us to gain funding to benefit the community. You will be eligible to elect the Committee of Management at the Annual General Meeting (AGM) each year.**

**First Name:**

**Surname:**

**Address:**

**Suburb:**

**Postcode:**

**Phone:**

**Email:**

**DOB:**

**Gender:**    Male    Female

**Emergency Contact:**

**Emergency Contact Relationship:**

**Are you taking any medications or do you have any disabilities or medical conditions that we should be aware of?**

**If you are currently participating in any activities at the Centre, what are they?**

**What other activities would be of interest to you?**

**Reason for seeking membership?**

**Signature**

---

**Privacy Statement:**

Chelsea Heights Community Centre Inc. abides by the Information Privacy Act and its principles. We will store your information securely and will not disclose your personal details to any organisation or individual without your consent.