

## **MEMBERSHIP APPLICATION FORM**

Thank you for taking time to complete a YRACA membership application form.

As outlined in the Rule Book of the Yugambeh Region Aboriginal Corporation Alliance (YRACA), to become a member of YRACA you must be;

- · at least 18 years old
- an Aboriginal or Torres Strait Islander person and descendant of Yugambeh Apical Ancestors.

## **APPLICANT DETAILS**

Title:	Givenname(s):				
Surname:					
Date of birth:					
Are your parents or an If yes, outline their detail	ny family members, current ils in the box below:	tly members of YRACA?	Yes	No	
Apical Ancestor / Yugar	mbeh Family connection:				
CONTACT DETAILS					
Postal address:					
Phone:		Email:			
DECLARATION					
	I consent to becoming a	member of YRACA and	I acknowledge	and agree that I have	been provided
a copy of the Rule Bo	ook and I understand the	rights and responsibilition	es of being a M	lember.	
				_	
Signature:				Date:	