



Membership Nomination/Renewal

2010-2011

***Renewal of membership will be available on the night at the SHARC AGM, however we understand if you may not be able to make it this year, and as a result we have included nomination/ renewal form for your convenience. In addition we are updating to utilizing electronic means of communication so request you provide a contact email address.**

I, _____ of

(Address)

(Suburb)

(State)

(Postcode)

(Occupation/Profession)

(Home Phone)

(Work Phone)

(Mobile Phone)

(Email Address)

Hereby apply to become a Member / to renew my Membership of the

(Please Circle Category)

Self Help Addiction Resource Centre Inc. and if approved, agree to be bound by the rules and regulations outlined in the Constitution.

Please find attached payment of \$5.00 being membership fee to the 30th June 2011 and commencing on approval by the Board of Governance.

(Signature of Applicant)

____/____/____
(Date)

Office Use Only

(Board of Governance Approval)

____/____/____
(Date)

Recovery Support Services
Association of Participating Service Users
Family Drug Help

Self Help Addiction Resource Centre Inc.

ABN: 18 052 525 948 ACN: A 003 280 313

140 Grange Road, Carnegie VIC 3163 tel: 03 9573 1700 fax: 03 9572 3498

email: info@sharc.org.au www.sharc.org.au