Appendix 2.

APPLICATION FOR ROTARY CLUB MEMBERSHIP OF:

**WESTERN EMERGENCY RELIEF NETWORK INC.**

I / We ……..………………………………………………………………………………………..

(full name of applicant & Rotary Club)

Address: .…………………………………………………………………………………………..

 postcode………………. phone……………………..email ……………………………………….

Website: ……………………………………………………………………………………………

desire to become a member of **WESTERN EMERGENCY RELIEF NETWORK INC.**

(name of the Association)

**Organisation’s Details**

Is the Rotary Club a Registered Incorporated Association: Yes / No

If Yes, what is the Registration Number: …......………………………………………………

**Nomination of Club Representatives for the WERN Committee of Management:**

1/ Name: Email: Phone:

2/ Name: Email: Phone:

**Agreement:**

In the event of admission as a member, I / we agree to support the purposes of the Association, and to be bound by the Rules of the Association and within the Guidelines of WERN Inc. for the time being in force.

………………………………………………………………………………………………...…….

 (signature of applicant) (position held)

**2019-2020 Network Rotary Club Membership Fees**

**Joining Fee: $1,000.00 (Exc. GST) Annual Subscription: $1,000.00 (Exc. GST)**

**Invoices will be sent once application received and approved by the WERN Board.**

Please complete the above details and return to Western Emergency Relief Network c- westernemergencyreliefnetwork@outlook.com or 8 Jamieson Ct. Eynesbury 3338.