

*To support a cohesive community and maintain a unique lifestyle*

## Jacobs Well and District Progress Association Inc

# Membership 2017 / 2018

Name of Applicant: .....

Address: .....

.....

.....

Email: .....

Nominated by (new membership only): .....

Seconded by (new membership only): .....

Signature: .....

Date: .....

Fee Paid (\$ 5.00):

(Per Person)

Yes

No

Application and Payment to be provided to the Treasurer

Added to Register: .....

Date

.....

## Membership 2017 / 2018

Received \$5.00 being membership in Full.

Date: .....