



**FORM 1B**  
**NEW MEMBERSHIP APPLICATION FORM**

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Residential Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel No: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Proposed by: \_\_\_\_\_ Seconded by: \_\_\_\_\_

Application for membership of Phoenix Lifestyle Support Association Incorporated is hereby made. The applicant supports the activities of the Association and agrees to abide by the rules of the Association (constitution) and to declare any possible conflict of interest.

A fee of \$2.00 is to be paid prior to membership.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: [phoenix@phoenixlsa.org.au](mailto:phoenix@phoenixlsa.org.au)

Postal address: PO Box 7407 Redland Bay 4165

Fax: 07 3829 3130

