



ParaQuad Association of Tasmania Inc.
(ABN 60620809307)
26 – 28 Tolosa Street, Glenorchy

Nomination for Membership (2021 / 2022)

Title: _____ First name / s: _____ Surname: _____

Address: _____

Home Phone: _____ Mobile: _____ Email Address: _____

Details of Applicant:

Nature of disability: _____

(Or) Interest in ParaQuad, (carer, supporter): _____

Sports/Hobby/ Recreational interest: _____

Other organisations belonging to: _____

I hereby give consent to be nominated for membership of ParaQuad Association of Tasmania Inc.

Name _____ Signed _____ Date _____

Please return completed and signed form to:
ParaQuad Association of Tasmania Inc.
PO Box 1528
Glenorchy Tas 7010

Scan and email to: admin@paraquadtas.org.au
Ph: 03 6272 8816

**Your nomination for membership will be presented to the next Committee of Management Meeting of the
ParaQuad Association of Tasmania Inc. for approval
Upon acceptance you will be issued a tax invoice for the amount of \$20.00*. (*Membership fee is fully tax
deductible)**