



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

Nomination for Membership 2023/2024

CONTACT DETAILS:

Title:	
Full name:	
Address:	
Home phone:	Mobile:
Email address:	

DETAILS OF APPLICANT:

Alignment in ParaQuad, (person with disability, carer, volunteer etc):
Membership of other organisations:

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

Signed:	
Full name (Printed)	Date:

Please return completed form to:

ParaQuad Association of Tasmania Inc.
PO Box 1528
Glenorchy Tas 7010

Or 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)

Document Title: NOMINATION FOR MEMBERSHIP FORM 2022/2023

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Next Scheduled Review Date: 01/07/2024