

Whitehorse Netball Association Inc.

2 Hanover Road, Vermont South, 3133

P.O. Box 6009, Vermont South, 3133

Tel: [0400 822 708](tel:0400822708)

www.whitehorsenetball.org.au



MEMBERSHIP APPLICATION

I (Print full name) _____

Address _____ Postcode _____

Mobile _____ Email _____

wish to be a member of Whitehorse Netball Association Inc. (WNA)

If my application is accepted, I agree to support the purposes of WNA and be bound by its rules.

Applicant's Signature _____ Date ____/____/____

I am over the age of 14 years (circle) Yes / No (members under 15 years of age will be Associate Members)

Clubs I am involved as a participant in _____

Send signed and completed forms by email to secretary@whitehorsenetball.org.au with subject line 'WNA Membership Application'.

Office Use Only

(Tick where applicable)

Application accepted by the WNA Board

Application rejected by the WNA Board

Date application reviewed by the WNA Board _____