



WONDAI

A.P. & I. SOCIETY INC.



APPLICATION FOR MEMBERSHIP



Please print clearly



Surname: _____

First Name: _____

Address: _____

_____ Postcode: _____

Email: _____

Phone No: _____

Mobile: _____

Signature: _____ Date: _____



New applications for membership will be presented to the next General Meeting for ratification.



BECOME A MEMBER AND BE PART OF
our community and future!



THANK YOU FOR YOUR SUPPORT!