

## P & C Membership Form

PERSONAL INFORMATION		
FULL NAME: (PLEASE USE BLOCK LETTERS)		
ADDRESS:		
	GENDER:	M F
PHONE - HOME:	EMAIL:	
MOBILE:	WORK:	
I AM: A parent of a child attending	An adult inter	ested in the school's
school;	welfare and m	ny date of birth is:
A staff member;	Other:	
I AM: Applying for new membership	Renewing my	membership
TERMS		
I apply for membership in the Richmond State School P to:	Parents and Citizens' Ass	sociation and I undertake
a) Promote the interests of and facilitate the developme good order and management of the School; and	nt and further improven	nent of the School and the
b) Comply with the Constitution of the P&C Association as specified in Schedule 2 of the Constitution, and any v		
12.2.10 Persons applying for membership at a get the Association at which their application is con- demonstrate exceptional circumstances in writin at which their application is considered.	sidered except where an	applicant member can
DATE:	SIGNATURE:	
		OFFICE USE ONLY
MORE INFORMATION		
88 Crawford Street, Richmond. QLD 4822		
(07) 47 686 333	Date Received	Date Accepted
https://richmondss.eq.edu.au/ourcommunity/pandc	Secretary	President