Schedule 5

APPLICATION FOR MEMBERSHIP FORM (Rule 5.2.1(a))

TO: SEVEN RIVERS ABORIGINAL CORPORATION (ICN 8522)

I hereby apply to be a Member of the Corporation.	
Name:	
Residential Address:	
Postal Address:	
Email Address:	
Contact Number:	
Date of Birth:	
I am a descendant of the Apical Ancestor/s:	
I am eligible for membership of the Corporation. By signing this form	n, I agree to be bound by
the rules of the Corporation and consent to be a Member.	
*Please continue to complete the family tree on the next page of tl	nis form.
Date: Signature:	
Confirmation by a Member of the Corporation who is also a de	escendant of whom the
Applicant claims to descend from.	
I confirm that the Applicant is accepted by the	descendant/s.
Name:	
Date: Signature:	
Corporation use only	
Application received	Date:
Application tabled at the Directors' meeting held on	Yes/No
Directors consider Applicant is eligible for membership	Date:
If not eligible, reasons why	Date:
Directors enter name, address and date on Register of Members	Date:
Directors have sent notification of Directors' decision to the	Date:

Schedule 5

MEMBERSHIP APPLICATION FORM CONTINUED

APPLICANT'S FAMILY TREE

