

# Western Australia Study Group

## Application for Membership

To PO Box 55  
Gosnells  
Western Australia 6990

Date \_\_\_\_\_

**All details provided are strictly confidential and will NOT be revealed**

<b>Full Name</b>	
<b>Residential Address (mandatory)</b>	
<b>Address for correspondence</b>	
<b>Phone</b>	<b>Fax</b>
<b>Email</b>	
<b>Please nominate two referees in support of your application.</b>	
<b>Name</b>	
<b>Address</b>	
<b>Phone</b>	
<b>Name</b>	
<b>Address</b>	
<b>Phone</b>	
<b>Please list any other relevant societies to which you belong</b>	
<b>Your Special Interests: Western Australia in details; others</b>	
<b>Applications, when received by the Secretary, will be tabled at the next regular meeting and processed at the subsequent regular meeting</b>	