Date



## MEMBER APPLICATION FORM FOR FOR VOTING MEMBER PRIVELEGES OF THE OAKLEIGH BASKETBALL ASSOCIATION INC.

(Registered Assoc. No: A0008136P)

I,
(name)
of
Wish to apply to become a voting member of the Oakleigh Basketball Association Inc.
In applying for this membership I undertake to
<ul> <li>support the objectives of the OBA;</li> <li>agree to comply with any code of conduct or regulations of the OBA;</li> <li>undertakes to pay such fees as the OBA may from time to time require;</li> </ul>
I also understand
<ul> <li>That the OBA executive must approve or reject the application;</li> <li>That the OBA executive must notify the applicant whether the application has been approved or rejected.</li> <li>That the applicant becomes a probationary member from the date of the Board meeting that approves this application; and full member 12</li> </ul>
months thereafter.  Signed
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