



Aspley State School P & C Association - Membership Form

SURNAME:

FIRST NAME:

OCCUPATION:

CHILDREN ATTENDING:

CHILD 1

NAME: GRADE:

CHILD 2

NAME: GRADE:

CHILD 3

NAME: GRADE:

ADDRESS / CONTACT DETAILS:

STREET:

SUBURB: POSTCODE:

PHONE (H): PHONE (W): PHONE (M):

EMAIL:

I agree to be bound by the constitution of the P&C and by all valid resolutions passed by the Association

SIGNATURE/S OF APPLICANT/S:

P&C USE ONLY

PROPOSED AT: APPROVAL DATE:

SIGNATURE OF P&C SECRETARY: