



P&C Membership Form

Please return to the P&C office with your payment (open Tuesday and Thursday mornings 8:30 to 9am)

I, _____ (your name)

Of _____ (your address)

Phone _____ Mobile _____

Email: _____ (used to contact you)

I wish to become a financial member of Ashfield Primary School P&C Assoc. Inc.

By paying the annual membership fee of \$1.00

- I understand that my annual membership is current for the _____ year.
- I agree to abide by the P&C Constitution (Association rules) and P&C Code of Conduct.

Signed _____
(Member)

Secretary's Use Only:

Fee Paid: _____ Signed _____ (Secretary)

Date: _____

Receipt Number: _____

One form is required for each person.