



your
community
connection

COMMUNITY HUB MEMBERSHIP 2018/2019 *Financial Year*

CHI's MISSION is to build an inclusive, connected and informed community, through the creation of opportunities for learning, public participation and diverse partnerships

Name: _____
(Individual, Business, Group, Organisation)

Address: _____

Signature of Applicant: _____

Date: / /

Contact details:

Phone: _____

Mobile: _____

Email: _____

**Annual Subscription Fee
\$5.00**

Preferred means of receiving correspondence from Community Hub Inc.

Post

Email

Other *please specify.....*

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