

Mount Hawthorn Primary School Parents and Citizens' Association Inc.



2023 Membership Form

Date:	
Name:	
Mobile:	
Email:	

I _____ (full name)

Of _____ (address)

wish to become a **financial member** of the Mount Hawthorn P&C Association Inc. by paying the annual membership fee of _____.

- I understand that my annual membership is current until the next AGM
- 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 _____

(For the member's records)

2023 P&C MEMBERSHIP RECEIPT

Received From _____ (members name)

Amount Paid _____ (membership fee)

Being Annual Membership fee of _____ P&C Association Inc.

Signed _____ (P&C Secretary)

Date _____