



## APPLICATION FOR MEMBERSHIP

IN ORDER TO COMPLETE THE FORM, ALL SECTIONS MUST BE FILLED IN!  
PLEASE CONTACT YSRC IF YOU NEED GUIDANCE ON A SPECIFIC SECTION.

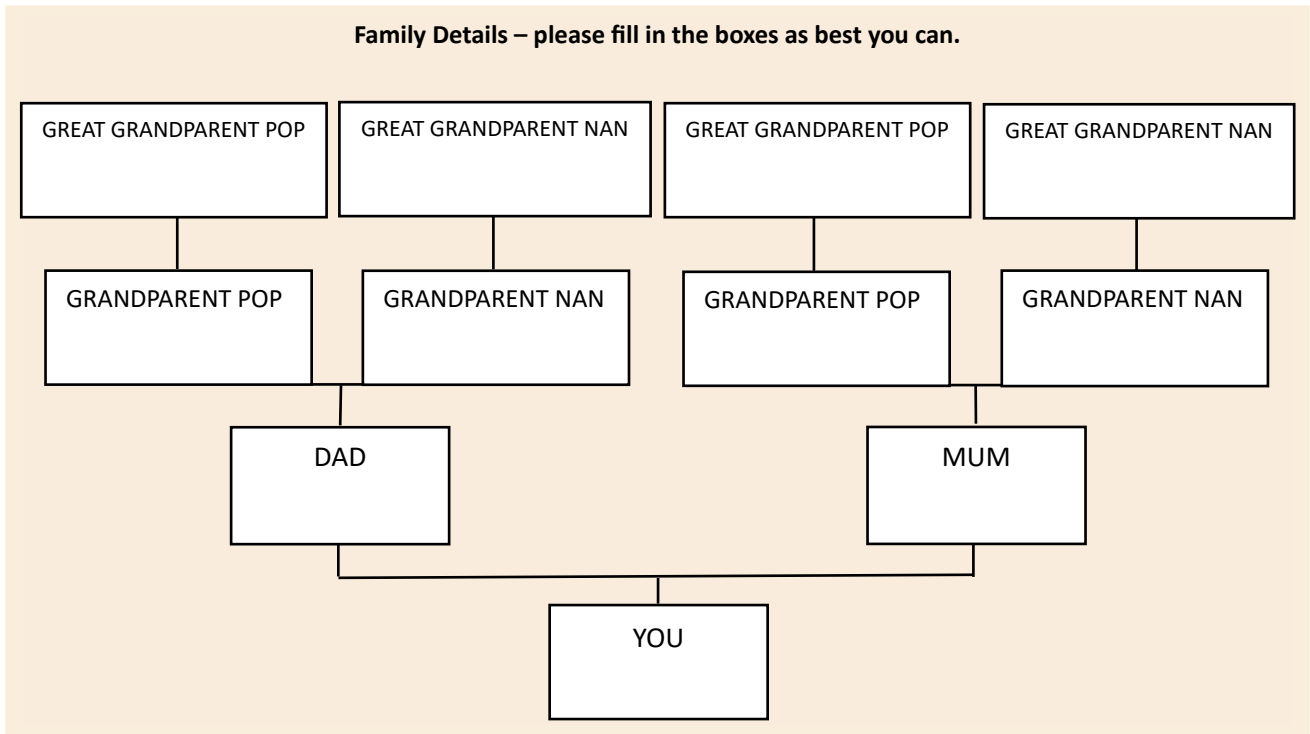
### SECTION 1: CONTACT DETAILS

|                 |                      |                 |                      |
|-----------------|----------------------|-----------------|----------------------|
| Full Name:      | <input type="text"/> | Date of Birth:  | <input type="text"/> |
| Address:        | <input type="text"/> |                 |                      |
| Suburb:         | <input type="text"/> | Postcode:       | <input type="text"/> |
|                 | <input type="text"/> | State:          | <input type="text"/> |
| Postal Address: | As above             | OR              | <input type="text"/> |
| Email:          | <input type="text"/> | Contact Number: | <input type="text"/> |

### MY APICAL ANCESTOR IS: (please tick as many as required)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Ap-barra (Upparawa) and Dharringa                              | <input type="checkbox"/> Jane Hunt                              | <input type="checkbox"/> Rosie Coleman                    |
| <input type="checkbox"/> Annie Tira   | <input type="checkbox"/> Jibjia (Rosie Jones)                   | <input type="checkbox"/> Sarah Jane Campbell              |
| <input type="checkbox"/> Biddie (mother of Fred Carnamah)                               | <input type="checkbox"/> John Yuna Councillor                   | <input type="checkbox"/> Sarah Broad                      |
| <input type="checkbox"/> Billy and Judy Thompson  | <input type="checkbox"/> Lizzy Flynn                            | <input type="checkbox"/> Sarah Feast (Jooldamoo)          |
| <input type="checkbox"/> Brindy / Brinty  | <input type="checkbox"/> Mary Gingina                           | <input type="checkbox"/> Shilling                         |
| <input type="checkbox"/> Cissie Broad   | <input type="checkbox"/> Mary Nundie                            | <input type="checkbox"/> Timothy Benjamin                 |
| <input type="checkbox"/> Eeranyoo   | <input type="checkbox"/> Nellie                                 | <input type="checkbox"/> Uanda                            |
| <input type="checkbox"/> Eliza  | <input type="checkbox"/> Noogy (grandmother of Minnie Campbell) | <input type="checkbox"/> Woondoorra                       |
| <input type="checkbox"/> Galena   | <input type="checkbox"/> Punch                                  | <input type="checkbox"/> Wyoo and Myonada                 |
| <input type="checkbox"/> Jane Cotter (mother of Sarah Mabel Bell and Patrick John Bell) |   | <input type="checkbox"/> Rosie (mother of Walter Ninghan) |

**SECTION 2: FAMILY DETAILS & CONNECTIONS**



**My cultural group connection/s within the Yamatji Nation ILUA Agreement area is (Please Tick):**

- Hutt River   
  Mullewa Wadjari   
  Southern Yamatji   
  Widi Mob

**The area of country within the Yamatji Nation ILUA Agreement Area that I most strongly connect to is:**  
(Northampton, Geraldton, etc):

- I confirm I meet the following eligibility criteria for membership as per Clause 8.1 of the YamatjiSouthern Regional Corporation Limited Constitution:
  - I am an individual who is at least 18 years of age; and
  - I am a Yamatji Nation Person.
  
- I agree to be bound by the rules of Yamatji Southern Regional Corporation Limited as per Clause 8.3(b)(ii) of the company’s Constitution.
  
- I confirm I am 60+ years of age this financial year and would like to apply for the ELDERS GIFT CARD program valued at \$1000. (NOTE to register you MUST include ID with proof of Date of Birth)

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**

Office Use Only

Date Approved \_\_\_\_\_

Member # \_\_\_\_\_