



Village of Hall and District Progress Association Inc

AFFILIATED COMMUNITY ORGANISATIONS

MEMBERSHIP FORM 2011 - 2012

GROUP / ORGANISATION

CONTACT PERSON.....

POSITION.....

POSTAL ADDRESS

.....

.....

E-MAIL

PHONE :

WORK..... HOME MOBILE.....

Signed.....

Date.....

Please return with fee of \$20 to : Treasurer, VHDPA, PO Box 43, Hall ACT 2618

(Cheques payable to: VHDPA Inc)

For direct deposit:

Account name: VHDPA Inc
BSB: 083-973
A/C Number 000 660 071