



Level 5 / 170 Queen Street  
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**Application for Membership of The Classical Guitar Society of Melbourne**

**Membership Type:** Student \$25  Adult/Professional \$40  Family \$60

I, .....  
FULL NAME

of, .....  
ADDRESS

.....  
EMAIL ADDRESS

..... CONTACT NUMBER                      OCCUPATION

desire to become a member of **The Classical Guitar Society of Melbourne.**  
In the event of my admission as a member, I agree to be bound by the Rules of  
the Association for the time being in force.

.....  
SIGNATURE OF APPLICANT                      DATE

I, ....., a member of the  
Association, nominate the applicant, who is personally known to me, for  
membership of the Association.

.....  
SIGNATURE OF PRESIDENT                      DATE

I, ....., a member of the  
Association, second the nomination of the applicant, who is personally known to  
me, for membership of the Association.

.....  
SIGNATURE OF SECONDER                      DATE