



APPLICATION – ASSOCIATION MEMBERSHIP

APPLICANT DETAILS

In the state of New south Wales, I/We hereby apply for Membership of the Association for Christian Education of Blacktown Ltd.

	Applicant 1	Applicant 2
First name	<input type="text"/>	<input type="text"/>
Second name	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Title (Mr, Mrs)	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>
Mobile phone	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>	<input type="text"/>
Business Ph	<input type="text"/>	<input type="text"/>
Did you attend Tyndale Christian School	<input type="text"/>	Which Calendar Year <input type="text"/>

Preferred contact method to arrange an interview

Single **Married** **Separated** **Divorced** **Other** _____

Home address
A post office box is not acceptable as a home address.
Provide one address only if addresses are the same.

	Street Address	Mailing Address
Street address	<input type="text"/>	<input type="text"/>
Suburb	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Phone	<input type="text"/>	<input type="text"/>

SUPPORTING INFORMATION

Please indicate the following:

I/We are applying to become an Associate Member? Yes No

I/We are applying to become a Full Member? Yes No

Do you currently attend church? Yes No If no, Why? _____

A reference of Christian character from your current church minister must be attached with your initial application.

If so, which church do you attend?

Church Name
Minister's Name
What is your involvement?
.....

Do you have any children? Yes No If so, how many children do you have? _____

Do your children attend Tyndale Christian School? Yes No If no, Why? _____

In support of your application do you declare and agree that:

I/We subscribe wholeheartedly to the basis of the Association as stated in the Educational Creed of the Association Yes No

I/We undertake to support the work of the Association by attending General Meetings, regularly praying for the School, school staff and Board Members and by participating in the work as far as I/we are able Yes No

I/We undertake to pay Membership Fees as and when they become due Yes No

You will be invited for an interview with the membership committee upon receipt of this signed application form

I give permission for Tyndale to use the details on this form to send me Association and other Tyndale information only. I understand that relevant information on this form will be passed to the appropriate staff if required.

Signed this day _____ of _____ 20_____

Signed: _____

Signed: _____