## ELLEN STIRLING PRIMARY SCHOOL P & C ASSOCIATION INC. P&C Membership Form

Please return to your P&C Secretary	
l,	(your name)
Of	(your address)
Phone Mobile Mobile	***************************************
Email	(optional)
I wish to become a financial member of	.P&C Assoc Inc.
by paying the annual membership fee of	
I understand and agree that I have no right to vote until my Membership Fee	is paid.
<ul> <li>I understand that my annual membership is current until the next AGM</li> <li>I agree to abide by the P&amp;C Constitution (Association rules) and P&amp;C Code</li> </ul>	of Conduct
Signed	(Member)
Secretary's use only:	
Fee paid: Signed Signed	(Secretary
Date:	
<del> </del>	
(Give this part to member)  2021 P&C Membership Receipt	
Received from (men	mbers name)
Amount paid (mem	nbership fee)
Being Annual Membership fee of Pa	&C Assoc Inc
Signed (P&	.C Secretary)

Date .....