

**Application for Group Membership of
Border Ranges - Richmond Valley Landcare Network Incorporated**

..... (*name of organisation*), hereby apply for
membership of Border Ranges - Richmond Valley Landcare Network Incorporated

I,(*name of organisation representative*)
declare that the(*name of organisation*)
currently has an interest in achieving the objectives of Border Ranges - Richmond
Valley Landcare Network Incorporated

I declare I am the authorised representative of(*name of
organisation*) and will abide by the rules set out in the Constitution of Border Ranges -
Richmond Valley Landcare Network Incorporated.

I acknowledge that membership of Border Ranges - Richmond Valley Landcare
Network Incorporated includes membership of the North Coast Regional Landcare
Network and Landcare NSW

Signed:.....

Position:.....

Date:.....

Contact Details:

Group name:

Contact Name:

Postal Address:

Email:

Website/facebook:

Contact Phone number:

Number of current members: