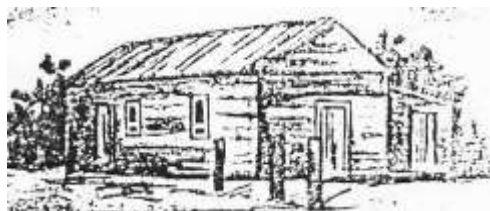


The Putty Community Association, Inc.



For the People of Putty

MEMBERSHIP APPLICATION

NAME / S _____

PUTTY ADDRESS _____

POSTAL ADDRESS _____

EMAIL ADDRESS _____

For Receipt of Notices and the Monthly Putty People Newsletter

PHONE NUMBERS _____

FULL OR PART TIME RESIDENTS? _____

OFFERS OF ASSISTANCE SKILLS _____

SUGGESTIONS FOR PCA OR OTHER ACTIVITIES _____

MEMBERSHIP FEE OF \$20 per person _____ DONATION _____

PAY BY CASH (personally), BY CHEQUE TO PUTTY COMMUNITY ASSOCIATION INC
408 PUTTY VALLEY ROAD PUTTY, 2330

OR BY EFT TO BSB: 062 622; ACCOUNT: 10444988 Please include your name

I/WE AGREE TO COMPLY WITH THE RULES OF THE ASSOCIATION.

Refer Constitution at www.putty.nsw.au/pca/constitution

SIGNATURE OF THE APPLICANT

SIGNATURE OF THE APPLICANT

JOINING DATE

JOINING DATE

WELCOME TO THE PCA FAMILY!

All correspondence to:

PUTTY COMMUNITY ASSOCIATION, INC.
408 PUTTY VALLEY ROAD, PUTTY NSW 2330