

## APPLICATION FOR MEMBERSHIP

## The Federal Party of Australia

				/ /	
Surname (Please print)	Given Names (in full)		Da	Date of Birth	
Residential Address		City/Suburb	State	Postcode	
<b>Telephone</b> (W): ( )	Te	elephone (H): ( )			
Mobile:	Fax: ( )		_		
Email:					
Declaration:					
I wish to become a member of Th	e Federal Party of Australia	and declare that:			
<ul> <li>(a) I am enrolled on the Common</li> <li>(b) I have lived at my residentia</li> <li>(c) I am not a founding member</li> <li>(d) I consent to this form being application for registration and I consent to an officer within this, my application to become</li> </ul>	al address for more than one of any other political party forwarded to the Australian as a Registered Political Par an the Australian Electoral me a member of The Federa	T; In Electoral Commission in some sty under Part XI of the Conn Commission contacting meal Party of Australia; and	nmonwealth Ele	ctoral Act 1918	
I declare that all the information I	have given on this form is	true and complete.			
		/ /			
Signature of Applicant		Date			
Membership Application Forms admin@federals.org.au or faxed: The Secretary, The Federal Party, Please Note: The AEC conduct asking you to confirm that you ar strictest confidence and membersl	(07) 4774 5335 <b>or</b> mailed PO Box 656, Hyde Park Q s random surveys to verify a member and signed thi	to: Old 4812. membership and it is pos s form. Membership detail	sible that they r		
This is the annexure marked	PARTY US		tion		
of(name of person ma	king the declaration)	sworn			
the	day of				
(signature of the person maki	ng the declaration)				
BEFORE ME: (signature of the	1.6 1 3	1			
(signature of the	person before whom the de	ciaration is made)			

Thank you for becoming a Member and valued supporter of The Federal Party of Australia: an organisation which is dedicated to the delivery of Natural Justice throughout the lives of all Australians.