



Multicultural Communities Council of South Australia

ABN 13-253-714 844

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# MCCSA MEMBERSHIP APPLICATION FORM (INDIVIDUAL)

**Vision:**

An equitable, cohesive and thriving South Australia.

**Mission:**

Multicultural Communities Council of SA will support and advocate for all people from culturally and linguistically diverse (CALD) backgrounds to realise their potential as active contributors to the economic, social and cultural life of South Australia.

YOUR DETAILS		
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other _____		
Post Nominals:		
First Name:		
Last Name:		
Postal Address:		
Suburb:	State:	Postcode:
Mobile/Phone:		
Email:		
Your email will be used for all correspondence and will be added to MCCSA mailing list.		

Do you work in the sector?

- Yes
- No

Please list the name of the Organisations:

Language(s) spoken other than English:

How did you hear about MCCSA?

Please provide a brief statement in support of your membership application.

*I have chosen to become a member of the MCCSA because...*

If there is insufficient space in this section, you may attach an annexure and submit as part of your application.

**MEMBERSHIP FEE \$15.00 per year (MCCSA membership year runs from 1 July to 30 June the following year)**

Notification of payment options will be advised once application has been approved by the MCCSA Board.

**FEEDBACK, ENGAGEMENT AND CONFIDENTIALITY**

MCCSA welcomes member feedback and active engagement in the work of MCCSA. MCCSA is committed to maintaining the privacy of information about its members.

<b>ACKNOWLEDGEMENT &amp; CONSENT</b>	
<input type="checkbox"/>	I acknowledge that prior to signing this application, I have read the Constitution of the MCCSA available on the MCCSA website <a href="http://mccsa.org.au/wp-content/uploads/2019/02/MCCSA-CONSTITUTION-2-December-2018.pdf">http://mccsa.org.au/wp-content/uploads/2019/02/MCCSA-CONSTITUTION-2-December-2018.pdf</a> and I acknowledge that I am in agreement with the Statement of Purposes within the MCCSA Constitution.
<input type="checkbox"/>	In the event of my admission as a Member, I agree: (a) to be bound by the Constitution and Rules of MCCSA; (b) to the publication of my name as a member of MCCSA.
<input type="checkbox"/> If you are unable to sign, please check this box and type your full name below to electronically sign this application.	
<b>Signed:</b>	<input type="text"/>
<b>Date:</b>	<input type="text"/>