



APPLICATION FORM
for
MEMBERSHIP OF
OVERNEWTON PARENTS & FRIENDS' 2017
(for use by friends of the College wishing to become a Member of Parents & Friends')

I, _____ (full name of applicant)

of _____ (address)

_____ (occupation)

wish to become a member of Overnewton Parents & Friends'. In the event of my admission as a member, I agree to abide by the Guidelines of Parents & Friends' for the time being in force.

Signature of Applicant

Date

PLEASE COMPLETE THE NOMINATION AND THE SECONDING BELOW IF THE APPLICANT IS APPLYING FOR MEMBERSHIP AS A FRIEND.

I, _____ (full name)
being a member of Parents & Friends', nominate the applicant, who is personally known to me, for membership of Parents & Friends'.

Signature of Proposer

Date

I, _____ (full name)
a member of Parents & Friends', second the nomination of the applicant, who is personally known to me, for membership of Parents & Friends'.

Signature of Seconder

Date