

Application for
Membership of Association to Cristina's House of Hope

I,.....of
(Name and occupation of applicant)

.....
(Address)

desire to become member of Cristina's House of Hope

I,hereby apply to become a member of
the above named incorporated association.

In the event of my admission as a member, I agree to be bound by the rules of the
association for the time being in force.

.....
(Signature of applicant)

Date:.....

I, a member of the Association,
(full name)
nominate the applicant, who is personally known to me, for the membership of the
association.

.....
(Signature of proposer)

Date.....

I, a member of
the association, second the nomination of the applicant, who is personally known to
me, for membership of the association.

.....
(Signature of seconder)

Date.....