

APPLICATION FOR ASSOCIATE MEMBERSHIP

N.S.W. COMMUNITY HOUSING TENANT NETWORK

**I wish to become an Associate Member of the
Tenant Network**

Associate Membership is open to any person who is not a Community Housing Association tenant in NSW who supports our aims and agrees to abide by our Rules.

NAME

ADDRESS.....

CONTACT NUMBER.....

EMAIL ADDRESS.....

NAME OF ORGANISATION.....

Privacy consent: I consent to the NSW Community Housing Tenant Network using the information I provide to develop the Tenant Network. This will involve receiving information and correspondence through the Network. My Personal details will be kept secure and only used to promote the aims of the Tenant Network. It is also my responsibility to advise the Network of any changes to my details

SIGNED.....**Dated**.....

Applications received that are not able to be read or do not contain full name and address will not be accepted until all details are received.

Thank you for joining the Tenant Network

Please post your application to :

The Secretary

NSW COMMUNITY HOUSING TENANT NETWORK

P.O. BOX 1001, SURRY HILLS. NSW 2010

APPROVED.....**DATE**.....

