



Application For Membership 2018/2019

MEMBERSHIP DETAILS (please complete all parts)

Surname: _____ **Given Name:** _____

Address: _____ **Postcode:** _____

Postal Address: _____ **Postcode:** _____

Telephone: _____ **Mobile:** _____

Email: _____

I support the purposes of the Kyneton & Community Learning Centre Inc. (see below)

I agree to comply with the Rules of the Kyneton & Community Learning Centre Inc.

Signed _____

Date: _____

PURPOSE

The purpose of the Association is the development of a stronger, more resilient community by:

- operating within a community development framework
- valuing and encouraging inclusive community participation and leadership opportunities
- providing high quality facilities that are inviting and welcoming for all members of the community
- building sustainable connections and working in partnership with the local community
- providing a broad range of activities, services and programs responsive to local community needs
- providing lifelong learning opportunities including Accredited and Pre-accredited Adult Education and Training Programs.