

**PINE RIVERS NEIGHBOURHOOD ASSOCIATION INC.  
MEMBERSHIP APPLICATION FORM**

**Mission Statement**

***“Enabling and encouraging individuals and families to take informed control of their own lives, and together enriching our community”***

730 Gympie Road  
Lawnton  
Queensland 4501



Telephone: (07) 3205 2955  
Fax: (07) 3881 2877  
Email: [prnc@prnc.org.au](mailto:prnc@prnc.org.au)

New Membership  Membership Renewal  Volunteer

Name of Applicant / Volunteer:

Individual .....

Or

Organisation .....

Address: .....

.....Postcode: .....

Phone: (Home) ..... (Work) .....

(Email) .....

If an Organisation, name of Representative: .....

Please indicate if you have an interest in, or if you would be willing to help the Association with knowledge/experience in any field

Area(s) of Interest: .....

I agree with and support the Mission Statement of the  
Pine Rivers Neighbourhood Association Inc.

Signed: ..... Dated: .....

Nominated by: ..... (Member)

Seconded by: ..... (Member)

**Annual Membership Fee: Organisation \$11.00 Individual \$5.50  
Volunteers at the Centre are offered a complimentary Membership**

**Please return to:**

**Pine Rivers Neighbourhood Association Inc.  
P.O. Box 2038, Strathpine Centre QLD 4500**