

ABN: 42 045 447 353

Email: info@mypicsa.org

PICSA MEMBERSHIP APPLICATION FORM (ORGANISATION) 1 July 2021 – 30 June 2022

Vision

A thriving, vibrant and harmonious Pacific Islands community of South Australia

Mission

Organisational support

Grant writing assistance

Other, please specify:

As the peak body of the Pacific Islands communities of South Australia, the Pacific Islands Council of South Australia Inc. aims to unite, equip and empower its members to grow and develop, and to become prosperous and successful communities that fully participate as Australians.

Benefits of becoming a member with PICSA

Access to hiring of equipment

Opportunity for networking with community leaders

Access to training opportunities at a reduced cost	Advocacy
Access to PICSA's networks	Connection to work opportunities
ORGANISATION DETAILS	
Organisation Name:	
Postal Address:	
Email	
This primary email address will be used for all correspondence and will be added to the PICSA membership mailing list.	
Name of Chairperson/President:	
Name of Secretary/Public Officer:	
Number of community members:	
Please tick the relevant box (or boxes) to indicate what your community is interested to be involved in	
Language/Culture Vouth W	elfare Community Women's
Religious Sports M	edia / Arts Senior citizens Men's

Please nominate the two (2) delegates that will represent your community at the Community Leaders Group (CLG) meeting and to vote at the AGM. A proxy may attend on behalf of a delegate with written consent prior to the AGM, however written proxy consent is not required at the Community Leaders Group meeting.

DELEGATE 1
NAME:
POSITION:
Example: chairperson/president/vice-president/treasurer/secretary/CEO
EMAIL:
MOBILE:
DELEGATE 2
NAME:
POSITION:
Example: chairperson/president/vice-president/treasurer/secretary/CEO
EMAIL:
MOBILE:

ACKNOWLEDGEMENT

I acknowledge that prior to signing this application I have read and agreed with the constitution and rules of PICSA. (Located at www.mypicsa.org)

I acknowledge that I am in agreement with the statement of purpose within the PICSA constitution.

In the event of admission to the Association as member I agree to be bound by the Constitution and Rules of PICSA.

Signed:

Signature of Chairperson/President

Date:

Payment Details

Notification of payment options will be issued to approved applicants once their membership has been formally ratified by the PICSA Management team.

The Annual Membership Fee for 'Organisation Membership' is \$100.

Please provide your organisation's constitution along with your organisation's membership fee.