

HOW TO STOP BEING A MEMBER

If you are a member and no longer wish to be one, you can resign in writing. Alternatively, if you are unable to be contacted on three separate occasions we will assume you no longer wish to be a member and remove your name from the membership register.

IT IS IMPORTANT TO LET US KNOW WHEN YOU MOVE HOUSE.

YOUR PRIVACY IS OUR PRIORITY

All personal information you have provided will help us process your application to become a member. Apunipima may use your information to communicate with you and inform you of activities and events. To view a full copy of our privacy statement please visit our website apunipima.org.au.

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apunipima

CAPE YORK HEALTH COUNCIL

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www.apunipima.org.au

MEMBERSHIP APPLICATION

JOIN US AS WE ALL DO ALL WE CAN
TO IMPROVE THE HEALTH OUTCOMES
OF PEOPLE IN CAPE YORK

Memberships
Apunipima Cape York Health Council
PO Box 12045
Westcourt QLD 4870



WHAT'S INVOLVED IN BECOMING A MEMBER

Apunipima Cape York Health Council is the community controlled health organisation of Cape York. Delivering a range of health services across all Cape communities, Apunipima is accountable to you its members.

Apunipima's Board is made up of people living in Cape York communities that, as a member, you get to elect.

Their job is to make sure that Apunipima does all it can to improve the health outcomes of people in Cape York.

ALL YOU NEED TO DO AS A MEMBER IS LET US KNOW IF YOU CHANGE YOUR ADDRESS AND TO TREAT OTHER MEMBERS WITH RESPECT.

HOW TO BECOME A MEMBER

To become a member of Apunipima, you must:

- › Be over 18 years of age
- › Be an Aboriginal or Torres Strait Islander with traditional or historical interests in Cape York
- › Be a resident in Cape York

IF YOU FIT THE CRITERIA ALL YOU NEED TO DO IS COMPLETE THIS MEMBERSHIP FORM AND RETURN IT TO APUNIPIMA.

At the next meeting of the Board, you will then be registered as a member. As a member you can attend, speak and vote at general meetings (including annual and special general meetings).

If you want, you can also:

- › Be made a Director of the Board
- › Put forward resolutions at general meetings
- › Ask the Directors of the Board to call a general meeting
- › Look at the books and records of Apunipima (if the Directors agree)
- › Vote to elect Board Members.

MEMBERSHIP APPLICATION



Name _____

Address _____

Telephone No _____

Email Address _____

I am over 18 years of age

Male Female

and live in the community of:

Aurukun

Bamaga

Coen

Cooktown

Hopevale

Horn Island

Injinoo

Kaurareg

Kowanyama

Laura

Lockhart River

Mapoon

Mossman Gorge

Napranum

New Mapoon

Pormpuraaw

Port Stewart

Seisia

Umagico

Wujal Wujal

Other _____

Signature

Date

Once completed, please cut where indicated and place in DL window face envelope = see over - alternatively you can hand it to one of our staff.

OFFICE USE ONLY

Accepted by the Executive Committee
as per minutes of meeting held on

Signature (public officer)

Date