

APPLICATION FOR ASSOCIATION MEMBERSHIP

- ✓ I subscribe to the Principles identified in the Association's Educational Creed and its purposes in providing schooling where parents together with staff provide Christian education in the Outer Eastern suburbs of Melbourne.
- ✓ I request membership of the Association so that I can be more actively involved in maintaining and setting directions for Parent Controlled Christian Education in our area and beyond.
- ✓ I undertake to abide by the Rules of the Association including the Educational Creed.
- ✓ I understand that beginning with commitment to Prayer and attendance at the two official General meetings each year, my contribution is not only in valuable physical activities such as working bees, classroom help and other activities, but also in a desire to grasp understanding of and encouragement for the values our association and school promotes. It is through this commitment and knowledge that the vision of Parent Controlled Christian Education will be passed on to the next generation.
- ✓ I have attached a reference from the leadership team at my place of worship.

Name:

Address:

Telephone: Home

Mobile

Email Address:

Church Affiliation:

Signature:

Date:

Endorsed by an Association Member.

Please Return This Application Form together with your Pastoral or Leadership Team reference to The Community Relations Officer via the school Office.