



**St Paul's School (Bald Hills)  
Supporters' Association Inc.**

PO Box 57  
Bald Hills QLD 4036  
ABN: 68 049 461 619

## MEMBERSHIP NOMINATION FORM

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

MOBILE PHONE NUMBER: \_\_\_\_\_

BLUE CARD HOLDER: Yes  No

CARD NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

PARENT/GUARDIAN  PAST PARENT  PAST PUPIL  OTHER/OVER 18  
(Tick one)

SUPPORTER GROUP: \_\_\_\_\_ EXIT YEAR FROM SCHOOL: \_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PROPOSER: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Print Name and Signature of existing member)

SECONDER: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Print Name and Signature of existing member)

Please tick if you would like to receive further Association information via email

Please note that SPSSA is covered for General & Products Liability Insurance (\$20,000,000) and Voluntary Workers – Personal Accident Insurance (\$250,000) via The Anglican Diocese of Brisbane.

Admission Date to Association: \_\_\_\_\_