



HARMONY ALLIANCE

MIGRANT & REFUGEE WOMEN FOR CHANGE

INDIVIDUAL MEMBERSHIP

Harmony Alliance: Migrant and Refugee Women for Change

Application Form

Membership Criteria

Individual members will be expected to:

- Identify as a woman from a migrant or refugee background*;
- Be 18 years and over;
- Demonstrate that they, in a personal capacity, are making a substantive contribution for the advancement and inclusion of migrant and refugee women in Australia; and
- Not serve as a representative of an Alliance organisational member.

* Including transwomen and non-binary people.

Name

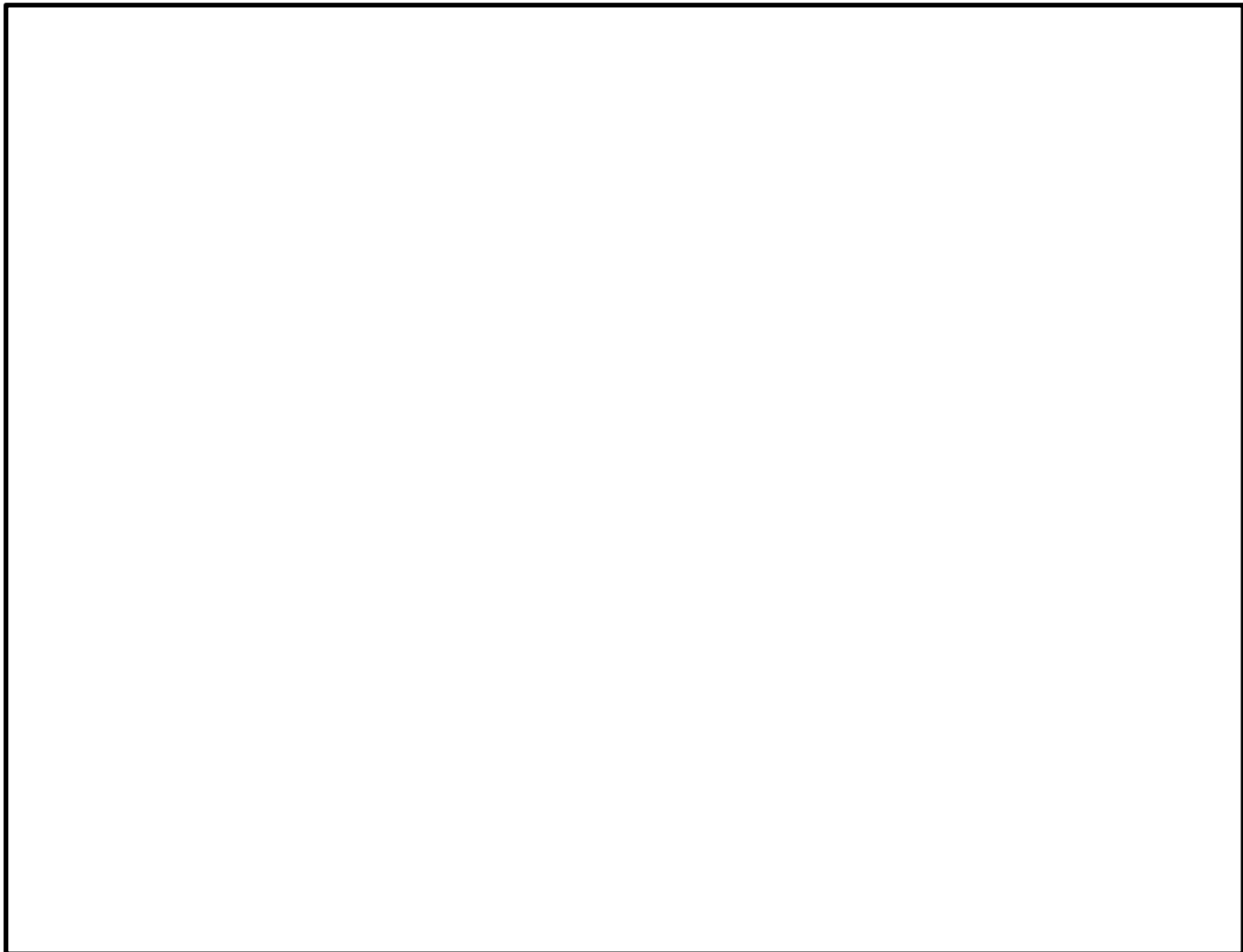
Postal Address

Contact Details

Phone: _____

Email: _____

Please provide a short statement (500 words) demonstrating how you satisfy the **Membership Criteria** outlined above.

A large, empty rectangular box with a black border, intended for the user to write a short statement demonstrating how they satisfy the membership criteria.

I, _____
(First name of Applicant) (Last name of Applicant)

Hereby apply for membership of the **Harmony Alliance: Migrant and Refugee Women for Change**.

I declare that I am eligible for membership under the **Membership Criteria** and am willing to be bound by the rules of the Alliance.

Signed: _____ Date: _____

Please sign and post to:

Harmony Alliance Secretariat

Po Box 1895

Canberra

ACT 2601

or

Scan and email a signed copy to secretariat@harmonyalliance.org.au



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