#

# Organisational Membership

**Harmony Alliance: Migrant and Refugee Women for Change**

**Application Form**

There are two types of organisational members. Please tick the applicable membership type:

* Organisational members representing migrant and refugee women in Australia
* Organisational members working for the advancement and inclusion of migrant and refugee women in Australia

**Membership Criteria**

A. Organisational members representing migrant and refugee women in Australia will be expected to:

* Be incorporated as an organisation, company or association;
* Demonstrate that the principal purpose and activity of the organisation is to represent migrant and refugee women’s group(s)\*; and
* Demonstrate that the majority of the organisation’s membership and/or governance identify as women from migrant and refugee backgrounds\*.

B. Organisational members working for the advancement and inclusion of migrant and refugee women in Australia will be expected to:

* Be incorporated as an organisation, company or association;
* Demonstrate that the principal purpose and activity of the organisation includes supporting the wellbeing of migrant and refugee women\* and advancing their social, economic and cultural participation.

**Please note** universities, academic bodies, research institutes, for-profit organisations, and government agencies at all levels are not eligible to become Alliance Members.

*\*This includes transwomen and non-binary people.*

**Name of Organisation and ABN**

**Postal Address of Organisation**

**Please provide a short statement (500 words) demonstrating how your organisation satisfies the Membership Criteria outlined above.**

The organisation nominates the following person to be their representative in relation to Harmony Alliance Business.

Name:

Phone:

Email:

Website:

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

On behalf of the organisation, I declare that the organisation is eligible for membership the **Membership Criteria** and that the organisation is willing to be bound by the rules of the Alliance.

I confirm that I have the authority to sign on behalf of my organisation.

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*

