



Form 4

FOOTBALL NT MEMBERSHIP APPLICATION-ZONE MEMBER

Zone (tick)

Southern

Central

Northern

Elected/Appointed Position (tick)

Zone Chair

Zone Vice Chair

Additional Zone Delegate

Name of Applicant

.....

Residential Address in Zone

Email Address.....

I agree

(a) To apply for membership of the Football NT (FNT)

(b) That once admitted as a member of FNT they will maintain that membership until their membership ceases under the FNT Constitution and FNT By Laws.

(c) Pursuant to rule 4.10 of the FNT Constitution to be bound by

- i. the FNT Constitution, the FNT By Laws, The Statutes and Regulations of FIFA, Asian Football Confederation and FFA in force from time to time, and
- ii. the Grievance Procedure and the dispute resolution process set out in rule 11.2 both whilst as a Member and after ceasing to be a Member(in respect of disputes relating to a matter arising while they were a Member)

Signature of Applicant:Date: / /



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ELECTORAL RETURNING OFFICER ELECTION CONFIRMATION

The Electoral Returning Officer (ERO) confirms the Applicant was invited to be a Member of FNT by a delegate of the Directors of FNT and they accepted the invitation.

..... / /

Signature of ERO

Name of ERO

Date of Commencement of Membership: / /



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