



GUMALA ABORIGINAL CORPORATION

2023-24 MEMBER SPONSORSHIP

APPLICATION FORM



Section 1 – Personal Details

Member's Name: _____ DOB: _____

Address: _____

Phone: _____ Email: _____

REQUIRED

Language Group: ☐ Banjima ☐ Yinhawangka ☐ Niyaparli

If this request is for a child, please provide their information below:

Child's Name: _____ DOB: _____

Address: _____

School name (if request is school related): _____

Language Group: ☐ Banjima ☐ Yinhawangka ☐ Niyaparli

Section 2 – Category

Please select the category that fits the closest with your request.

☐ Education and Training ☐ Health and Wellbeing ☐ Cultural Purposes

☐ Community Development ☐ Other: _____

Section 3 – Summary of Request

Please give a detailed description of your request.

Head office: 1 Stadium Road, Tom Price WA 6751 | Postal address: PO Box 3167, East Perth, WA 6892

Phone: 1800 486 252 (1800 GUMALA) | Email: applications@gumala.com.au | Fax: 08 9188 1846

Your personal information is protected by the Privacy Act 1988 and is collected by GAC for the administration of member benefits and services.

Section 4 – Reason for Request

Please describe how this request will benefit you or your family, and the reasons behind your request.

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Section 5 – Goods / Services

As we can only pay directly to suppliers, we will need a breakdown of the goods/services requested and the associated costs. We cannot consider your request without this.

Description of Items:	Supplier:	Payment Due Date:	Amount:
<i>(e.g. football boots)</i>	<i>(e.g. Sports Plus)</i>		
Total:			

Comments:

Please complete the application form in full and note that GAC will contact Members regarding the outcome of their application, whether accepted or declined.

Signature: _____

Date: _____

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