



GUMALA ABORIGINAL CORPORATION 2024-25 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

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