

Change of Address Form

Aboriginal Culture and Resource Centre

(Full Name of Member	(°)	
Of		
(NEW Address of Memb	oer)	
Contact		
(Email of Member)		
I am a member of the corporation and I appoint	-,	
(Name and Address of Me	ember)	
Would you like to be on our mailing list?	Yes	No
Signature	Date	
Ι		
(Full Name of Membe	er)	
Of		
(NEW Address of Mem	lber)	
Contact		
(Email of Member))	
I am a member of the corporation and I appoir	nt,	
(Name and Address of M	lember)	
Would you like to be on our mailing list?	Yes	No
Signature	Date	



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Would you like to be on our mailing list?	Yes No
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