

APPENDIX I

BARADA BARNA GROUP SOCIO POLICY APPLICATION FORM

| APPLICANT INFORMATION (PARENT / CARER): Please print clearly | | |
|---|--|------------|
| Date of Birth: | First and Second Name: | Surname: |
| Street Address: | | |
| City: | State: | Post Code: |
| Mobile: | E-mail (An email will be sent to notify you of the outcome): | |
| Postal address (If same as street address write "As Above"): | | |
| If support is required for a child under 16, please complete below: | | |
| Names and ages of child / children: | Parents Names: | |
| | | |
| Banking Details: | | |
| Bank: | BSB: | Account: |

Please ensure banking details are on any quotes or paperwork with a reference number.

Please indicate Apical Ancestor:

| | | | | |
|---|---|--|--|---|
| <input type="checkbox"/> Bob Lotus | <input type="checkbox"/> Lizzie Payne | <input type="checkbox"/> Daisy (wife of Booyah McDonald) | <input type="checkbox"/> Maggie (wife of Toby Barker, Peter Darwin and Bert Fox) | <input type="checkbox"/> 'Polly' Mary (wife of Robert Noble and Bert Fox) |
| <input type="checkbox"/> Lizzie (wife of Paddy Flynn) | <input type="checkbox"/> Polly (wife of Tommy Mitchell) | <input type="checkbox"/> Lucy Ross | <input type="checkbox"/> Laura (wife of Duke/George Barker, Neddy/Teddy Sauney and Adam Bowen) | <input type="checkbox"/> Charles Budby (father of George 'Salt Bush' Budby) |

Details (Please tick the applicable box):

- | | |
|--|--|
| <input type="checkbox"/> Educational Purposes (Appendix A) | <input type="checkbox"/> Medical Assistance (Appendix E) |
| <input type="checkbox"/> Sporting Endeavours (Appendix B) | <input type="checkbox"/> Aged Support (Appendix F) |
| <input type="checkbox"/> Funeral Expenses (Appendix C) | <input type="checkbox"/> General Applications (Appendix G) |
| <input type="checkbox"/> Elders Christmas Support (Appendix D) | <input type="checkbox"/> Job Readiness (Appendix H) |

NOTE: You must attach all supporting documents, including receipts, invoices and quotes to the Application Form.

Please note: **Applications will not be reviewed without all information attached.**

For Directors' use only:

| | |
|---------------------|--|
| Application Number: | |
| Documents Attached: | |
| Remarks: | |