Transition Feilding

Individual Membership Form

Name:
Postal address:
Home phone: Cell phone:
Email address:
I prefer to be contacted by: email home phone text message (please circle one)
I give permission for my contact details to be shared with other members: yes no (please circle one)
I agree with the purpose of Transition Feilding:
'Earth Care', 'People Care' and 'Fair Share' throughout the community of Feilding and surrounding areas. Transition Feilding will: • Provide educational and practical projects to increase knowledge and skills that enhance well-being, sustainability and resilience in the local community. • Promote the protection, conservation and regeneration of the environment. • Facilitate greater social cohesion and integration within the community. • Cooperate with and support other community groups within the greater Feilding area that are engaging in projects that promote well-being, sustainability and resilience in the local community. • Secure and manage funding to achieve the purpose of Transition Feilding.
I agree to abide by the rules and processes of Transition Feilding.
Signed: Date:
My skills and interests: