

## Membership Application Form

*The **Badimia Bandi Barna Aboriginal Corporation (BBBAC)** is established for the Badimia People to move forward; to assert our culture and identify any interests on Badimia Country. By becoming a member you are bound by the Rule Book (publicly available on [www.oric.gov.au](http://www.oric.gov.au) or via email upon request).*

Applicant details		
<b>Title:</b> Mr/Ms/Mrs/Miss	<b>First name:</b>	<b>Last name:</b>
<b>Date of birth:</b>		<b>Contact number:</b>
<b>Address:</b>		
<b>Postal address:</b>	<input type="checkbox"/> as above OR	
<b>Email:</b>		

My apical ancestor is: (please tick)			
<input type="checkbox"/>	Timothy Benjamin and Mary Assil	<input type="checkbox"/>	Frances (aka Mary) Bynder and John Bynder
<input type="checkbox"/>	Albert Nebrong and Dinah	<input type="checkbox"/>	Galena (aka Lena)
<input type="checkbox"/>	Yilayajambin and Bilygwi	<input type="checkbox"/>	Ninghan Freddie
<input type="checkbox"/>	Ninghan Billy	<input type="checkbox"/>	Polly Little
<input type="checkbox"/>	Lisa Martin	<input type="checkbox"/>	Topsy
<input type="checkbox"/>	Eva Renie (or Rene)	<input type="checkbox"/>	Old Julia
<input type="checkbox"/>	Lizzy (aka Joonby)	<input type="checkbox"/>	James Jones and Louisa Doyle
<input type="checkbox"/>	Mary Little	<input type="checkbox"/>	Melba Shilling
<input type="checkbox"/>	Melbin	<input type="checkbox"/>	Unsure

**Is there a particular part of Badimia Country that you are most strongly connected to? If so, where is it?**

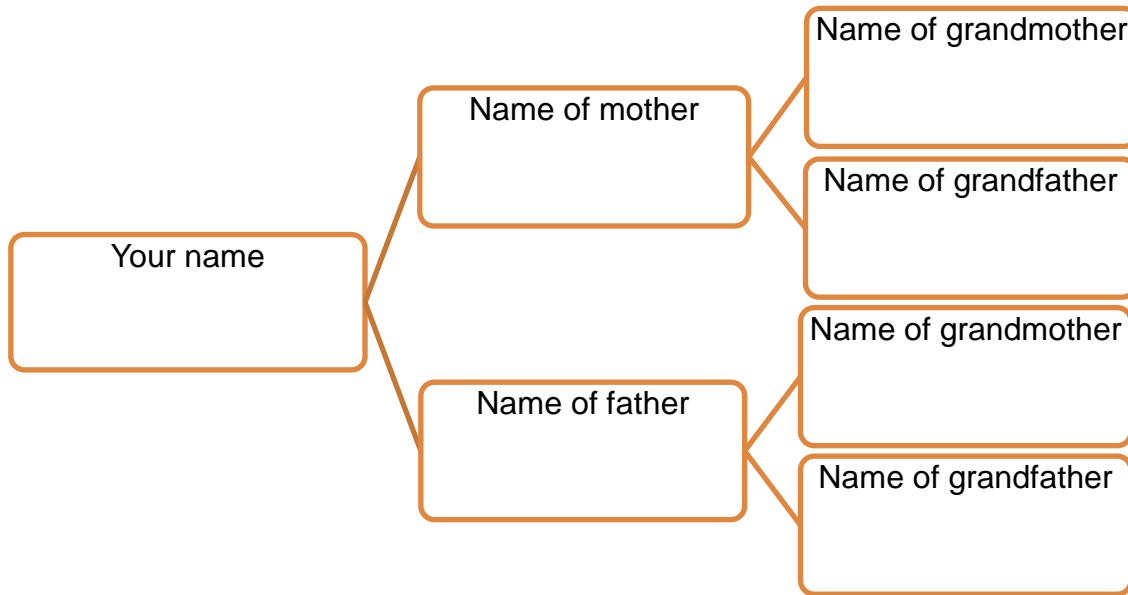
Applicant Declaration (please circle)	
YES / NO	I wish to become a member of the BBBAC and confirm I meet all known eligibility criteria
YES / NO	I am a Badimia person
YES / NO	I agree to be bound by the rules of the Rule Book and the Code of Conduct.
<b>Signature</b>	<b>Date:</b>

*Please turn over*



**Family Details**

Please complete to the best of your knowledge. Leave unknown areas blank



**Please email completed application form to: [badimia@outlook.com](mailto:badimia@outlook.com) or post to:**  
Badimia Bandi Barna Aboriginal Corporation  
PO Box 46 WUBIN, WA 6612

**Corporation use only**

Application received	Date:
Application tabled at Board meeting held on	Date:
Board consider applicant to be eligible for membership	YES /NO
Board enters name, address, and date on register of member (Also, Indigeneity if non-Indigenous members are allowed)	Date:
Board sent notification of Boards decision to the applicant on	Date: