

Schedule 2 Membership Application Form

Owners Aboriginal Corporation (YITLOAC) – ICN 3840

Please fill in the following information and use a separate sheet if more space is needed:

Surname		Title (Mr, Mrs, Miss, Ms)		
First / given name		Date of Birth		
Middle name(s)				
Residential address				
Suburb / town		Postcode		
State		Email address		
Phone number	Mobile		Home	
Mother's full name				
Mother's parents full names		Mother's father:	Mother's mother:	
Father's full name				
Father's parents full names		Father's father:	Father's mother:	

Please tick the apical ancestor/s that you are descended from (attaching relevant supporting materials, including birth certificate):

Annie (born at Cordillo Downs), mother of Archie Guttie;	<input type="checkbox"/>
Clara Nirrpinni, mother of Frank Booth and Alice Miller (nee Booth);	<input type="checkbox"/>
Cora the mother of Bob Parker and Nellie Parker	<input type="checkbox"/>
The parents of Flash Ted Bikehandle and Flash Tommy	<input type="checkbox"/>
Kimi (born at Innamincka) and his wife;	<input type="checkbox"/>
Maramunda Jack "The Ripper" Parker;	<input type="checkbox"/>
Caroline (born at Cordillo Downs) the mother of Mary Stafford (nee Moore), Jack Moore, Charlie Moore, female twins (Winifried and Freida) and Albert Moore;	<input type="checkbox"/>
Brothers Walter Harris(on) and Dick Harrison;	<input type="checkbox"/>
The parents of Lilly (whose married name is Parker) and her sister Kathlene (whose married name is George);	<input type="checkbox"/>

Annie and her husband, who are the parents of Coongie Maggie (born at Coongie Lakes in South Australia);	<input type="checkbox"/>
The parents of the sibling set – Billy Parker, Jessy Parker, Peter “Petekin” Parker, and Paddy Parker;	<input type="checkbox"/>
The parents of sibling set – Mertzy George and Mertzy Johnny and Mertzy Mick;	<input type="checkbox"/>
Larriken Mick	<input type="checkbox"/>
Any other person acknowledged by the Common Law Holders as a Yandruwandha or Yawarrawarrka apical ancestor (if applicable, please describe):.....	<input type="checkbox"/>

Further information:

I understand, if I am accepted as a member, that the contact information will be provided to the Trustee appointed to the YY Trust, any associated entities of YYTLOAC, and any service providers engaged by YYTOAC or associated entities, to be held on a contact database. I declare the above information to be true and correct.

Signature.....

Date.....