Details of I		and ad	dress of each	person who consen	nts to I	become a membe	r.				
Member details and shareholding  Address of individual or			Family name								
			Given names  OR								
											Company name
			ACN/ARBN/ ABN								
			care of								
			company			Office, unit, level or PO box number  Street number and Street name					
	Suburb/City				State/Territory						
			Postcode		country (if not Australia)						
Share class code	Number of Amou shares taken up pay po		unt agreed to er share	Total \$ paid on these shares		Amount unpaid per share	Total \$ unpaid on these shares		Fully paid (y/n)	Beneficially held (y/n)	
					_						
					+						
					+						
					+						