Constitution of Danila Dilba Biluru Butji Binnilutum Health Service

Schedule 2 - Membership Application

Office use only

Application tabled at Board meeting held:

Directors' confirmed application is eligible for membership (Please circle) **Yes / No**

Membership accepted (or reason for rejection) (Please circle) **Yes / No**

Entered on register of members Date / /

Chair's signature

Contact Us

Phone: 8942 5400

Email: info@ddhs.org.au
Website: www.ddhs.org.au
Or contact one of our clinics below:

Darwin Clinic
32—34 Knuckey St,
Darwin NT 0800

Men's Clinic
9 Keith Lane,
Fannie Bay, NT 0820

Rapid Creek Clinic
Shop 35, 48 Trower Rd,
Millner NT 0810

Malak Clinic
Shop 3, 1 Malak Place,
Malak NT 0812

Palmerston Clinic
Unit 1/7 Rolyat St,
Palmerston NT 0800

Bagot Clinic
133 Bagot Rd Ludmilla,
Bagot Community,
Darwin NT 0820

Humpty Doo Clinic
3 Skewes St,
Humpty Doo, NT 0836

Applying for Membership

Applying for membership - easy as 1,2,3

1 **Fill out the membership application form on the inside of this brochure**

2 **Get two existing Danila Dilba members (who know you) to endorse your application (sign your form)**

3 **Send your application back to us via:**

- Email: info@ddhs.org.au
- Post: GPO Box 2125 Darwin NT 0801
- In person: 28 Knuckey St, Darwin NT 0801

Danila Dilba®
Health Service

Membership Form

Join your health service!

@DanilaDilbaHealth **@DanilaDilba**

www.ddhs.org.au

What we do...

Danila Dilba Biluru Butji Binnilutlum Health Service's vision is for Biluru (Aboriginal and Torres Strait Islander) peoples of the Yilli Rreung Region (greater Darwin) to experience health, wellbeing and quality of life outcomes that are equal to, or greater than that of non-Aboriginal Australians.

Our purpose is to improve the physical, mental, cultural and social wellbeing of the Biluru people of the Yilli Rreung region through innovative, culturally-safe and effective comprehensive primary health care programs and services.

Our Board...

Danila Dilba's Board of Directors is elected by our members. Any Biluru (Aboriginal and/or Torres Strait Islander) resident of the Yilli Rreung Region (greater Darwin) over the age of 18 can apply for membership.

The Board of Directors has eight directors, six who are elected for three-year terms and two Independent Directors appointed by the Board. The Board positions are a Chair, deputy Chair, a Larrakia Director, two Independent Directors, and three further Directors.

Staggered elections take place, with up to one-half of the electable board positions up for re-election each year.

Step 1

Complete this membership application form.

First name of applicant

Last name of applicant

Residential address of applicant

Applicant date of birth / /

Applicant phone

Applicant email

I hereby apply for membership of Danila Dilba Biluru Butji Binnilutlum Health Service Limited. I declare that I am eligible for membership under rule 3.4 of the Constitution. I acknowledge and understand that I will become liable to pay the Guarantee of $1.00 to the Company if the Company is wound up.

By providing an email address in this membership form, I agree to receive all member communication from Danila Dilba electronically (including any notices of meeting). I agree that I will notify DDHS if I would instead prefer to receive member communication in physical form.

The information provided above will be stored by Danila Dilba in accordance with the Privacy Act 1988 (Cth) and will be used to provide you with member services.

Are you a Danila Dilba client? (Please circle) **Yes / No**

Do you consent to Danila Dilba updating your member contact information from your client record? (Please circle) **Yes / No**

Applicant signature

Date / /

Step 2

This application needs to be endorsed and signed by two existing members of the Company that have been members of the Company for more than three (3) months. Those endorsing the applicant declare that:

- the applicant is known to them personally; and
- the person is of Aboriginal or Torres Strait Islander descent, identifies as an Aboriginal and/or Torres Strait Islander and is accepted as such in the community in which they live.

Tick this box if you would like the Danila Dilba Company Secretary to identify existing members who can endorse your application. ☐

By requesting the Company Secretary to identify existing members to endorse your application, you agree to the Company Secretary sharing the information on this form with DDHS members with whom the Company Secretary communicates for this specific purpose.

Endorsing member 1

Name

Signature Date / /

Endorsing member 2

Name

Signature Date / /