



FAMILY & LOCAL HISTORY CONFERENCE & FAIR  
24 - 26 May 2019

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## APPLICATION FOR REGIONAL SUPPORT

Name:.....

Contact No: .....

Email Address (please print): .....@.....

Signature of Applicant: .....

Please ask an Officer Bearer of your organisation to complete the following:

I, ..... (Name of Office Bearer)

confirm that ..... (Name of Applicant)

is a member of ..... (Name of Organisation)

I confirm that this organisation is a financial member of History Queensland Inc. and

I confirm that this organisation supports the application for Regional Support.

..... (Signature)

Position: ..... (e.g. President, Secretary)

**Closing Date for applications: Friday 14 September 2018**



*Waves in Time is supported by History Queensland Inc.*

Email – [info@wavesintime2019.org.au](mailto:info@wavesintime2019.org.au)

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