

**ANKA SUPPORTED ART CENTRE
MUTUAL AGREEMENT FORM:**

Art Centre Applicant Details:

Art Centre Name:

Art Centre Address:

.....

..... Postcode.....

Postal Address:

(If same as residential write 'As Above')

Postcode.....

Telephone: Home..... Mobile.....

Email:

Contact Person: Mr Mrs Miss Ms Other

Name:

Position:

PLEASE ENSURE YOU HAVE READ THE ANKA RULE BOOK
AND CONFIRM THE FOLLOWING:

Applicant is one of the following:

- An Incorporated Aboriginal Organisation as designated by ORIC under the CATSI Act (*Corporations (Aboriginal and Torres Strait Islander) Act*), or at the NT Level.
- A subsidiary of an Incorporated Aboriginal Organisation
- A subsidiary of a Council Shire

Note: 1. All ANKA Members must be of Aboriginal descent, eligible for membership of an Art Centre and normally resides in the area of the Corporation.
2. The term 'Aboriginal' is defined as being a descendant of either the Indigenous Australian Aboriginal people or Indigenous Torres Strait Island people.
3. The term 'we' shall reference the said organization.
4. This form was last updated, May 2011.

Art Centre Declaration:

On behalf of (insert Art Centre name)

I, (insert authorised agent name)

declare that this Art Centre, whose members are all of indigenous descent, at least 18 years old, and reside within the Corporation's area, is eligible and hereby apply to be an ANKA Supported Art Centre.

If admitted, I, on behalf of the said Art Centre agree to accept and abide by the ANKA Rules and Regulations. On behalf of our members, we guarantee their artistic integrity, obligations to ANKA and agree to their inclusion as ANKA Members. In addition, we take full responsibility to maintain and annually supply ANKA with current Art Centre Membership listings (including notification of new members or those whose association has ended).

Please provide a brief statement (approx 500 words) regarding your Art Centre including:

- Art Centre Description
 - length of current operation time
 - how many people you service
 - types of artworks produced or held in your Art Centre

- Statement referencing why your Art Centre wishes to become an ANKA member

All information provided upon this application is true and correct.

Authorised Agent:

Signature: Date:

Witness:

Signature: Date:

OFFICE USE ONLY	
Date Application Received	
Date Considered at Board Meeting	
Admitted or Not Admitted	
Date of Membership Admittance	
Date Applicant Advised	

Signature:
(ANKA Chairperson or Delegate)

Date:

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