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105.1 LIFE FM BENDIGO: PROGRAM PROPOSAL

Proposal Date:

Group Name:

Group Representative Name:

Denomination Name:

Program Title:

Program duration (Minutes):

Program Details attached

Please circle YES/ NO

Have you read and agree with THE RELEVANT PROGRAM POLICY attached

Please circle: YES / NO

I am the person designated to make this Application

SIGNED:

Position within Group/Denomination: