

## 2017-2018 MEMBERSHIP APPLICATION

To ensure full membership enrolment, please complete one form for each person.

Please tick	
Post	
Email	

TITLE: MR, MRS, MS, MISS, MSTR

Newsletter delivery option

SURNAME: \_\_\_\_\_ CHRISTIAN NAME/S: \_\_\_\_\_

OCCUPATION: (Optional) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ MOB: \_\_\_\_\_

Date 1<sup>st</sup> Joined: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(For associate members)

SIGNATURE: \_\_\_\_\_ PARENTS SIGNATURE \_\_\_\_\_  
(For associate members)

### OFFICE USE ONLY

Membership year is from 1<sup>st</sup> July one year until 30th June in the following year.

Concession cards must be sighted by staff and the number recorded in the appropriate field.

#### MEMBERSHIP TYPE

MEMBER
  BUSINESS
  LIFE
  ASSOCIATE (eg JUNIOR)

✓	FEES	✓	DISCOUNT APPLIED
	SINGLE \$48.50		CONCESSION SINGLE \$30.00
	DOUBLE \$80.00		CONCESSION DOUBLE \$50.00
	ASSOCIATE (12 TO 18 YEARS) \$10.00		PCC no
	ASSOCIATE (UNDER 12) FREE		HCC no
	CLUB/NON PROFIT \$80.00		Seniors
	CORPORATE \$110.00		Veteran Affairs

FEE PAID \$ \_\_\_\_\_ RECEIPT NO \_\_\_\_\_ VOTING RIGHTS \_\_\_\_\_ (yes/no)

SIGNED BY STAFF \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED SECRETARY: SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

#### RATIFIED BY COMMITTEE

MEETING DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_  
CHAIRMAN / VICE CHAIRMAN

Office use only	
Action	Initial
O/Look	
D/Base	
Card	