

APPLICATION FOR MEMBERSHIP

I, Dr Mr Mrs Miss Ms (please circle) (full name)

of (residential address)

hereby apply to become a member of the Wagga Wagga & District Family History Society Inc. In the event of my admission as a member, I agree to be bound by the current Objectives and Rules of the Society.

Signature of Applicant: Date: / / Preferred given name

I, (name of proposer), being a financial member of the Society, do hereby nominate the above Applicant for membership.

Signature of Proposer: Date: / /

TYPE OF MEMBERSHIP APPLIED FOR (please circle)

- | | |
|--|---|
| <p>1. Ordinary: Full year: 1 July - 30 June \$38
 Half year: 1 Jan - 30 June \$19</p> | <p>2. Pensioner: Full year: 1 July - 30 June \$28
 Half year: 1 Jan - 30 June \$14</p> |
| <p>3. Family member living at same address:
 Full year: 1 July - 30 June \$12
 Half year: 1 Jan - 30 June \$6</p> | |

Pension Number must be quoted to receive the Pension Rate
Seniors Card (only) holders do **NOT** qualify for Pensioner Rates.

- | | |
|---|---------------------------------|
| Have you previously been a member of this Society? | Yes / No (please circle) |
| How do you wish to receive your Monthly Newsletter ? | Post / email (please circle) |
| How do you wish to receive your Journal ? | Post / pdf file (please circle) |

Postal Address

Email Address **Phone No** (optional)

Please find enclosed **Cash / Cheque** (please circle) for \$

You can pay by **Direct Deposit**.

Please use your **Name** as the Reference and **Email** the Society to let us know you have paid.

Direct Deposit Details

Bendigo Bank
WW&D FHS Inc.
BSB: 633 000
Account No: 169210739
Reference: Your Name

Please Note: All applications for membership are approved by the Committee which meets in the 2nd week of the month, except December. A New Member Pack, including a Welcome letter and Membership card, is posted out once approval has been given.

Privacy Provision

I give my permission for my name and interests to be placed on the Society's web page or in any other format, e.g. fiche, book, decided by the Society. I also give my permission for the Society's web master or secretary to forward my postal or email address to inquirers when requested. (This Privacy Provision needs to be signed and dated before any personal information will be placed on the web page or in any other publication or forwarded to an inquirer).

Signed Date: / /

OFFICE USE ONLY

Approval date	Master Roll (red)	Email Secretary	Label List	New Member Pack
Membership No	Year Book (yellow)	Computer Year List	Receipt	Filed