



MEMBERSHIP APPLICATION

I hereby apply for membership of the above Association for the year 1st January 2019 to 31st December 2019

Enclosed is my membership fee of \$5.00 or see bottom for bank details for EFT.
I am a Life Member of the Association and enclosed is my \$5.00 for voting rights.
Delete whichever is not relevant.

You are advised to obtain your own private personal accident insurance cover.

Name:

Address:
.....

Phone Number:.....

Email:

Date of Birth.....

Applicant's Signature:

Guardian's Signature.....

Date:

Date received by A.H. & I. Association Inc.....

Receipt Number.....

For EFT Payment: BSB 633 000 Account Number 162 999 619 Ref: Your name/s