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Cnrs Service and Rupert Sts Bairnsdale, Victoria, 3875

PO Box 973 Bairnsdale, Victoria, 3875

## MEMBERSHIP APPLICATION FORM **2024**

• Membership Fees: Annual Membership \$50

• Half Year Membership \$30 (from 1st July ONLY)

 Associate Membership \$10 (must be current member of another U3A)

\*FEES ARE DUE AND PAYABLE AT TIME OF ENROLMENT\*

## **NEW & EXISTING MEMBERS ~ (PLEASE PRINT CLEARLY)**

FAMILY NAME:			GIVEN NAME:		
Have you been a member of U3A Bairnsdale be	If Yes, please provide your <b>MEMBERSHIP N</b>	0:			
*If previous Membership details have no agreement section below, sign & date, tl	t changed nen comple	& your membe te the remaind	rship number <u>is included αbove</u> pleαs ler of this form & submit to the office.	e go straigh	t to the
YEAR OF BIRTH: (Statistical information required for funding)			PREFERRED NAME: (for badge)		
HOME ADDRESS:					
POSTAL ADDRESS IF DIFFERENT:					
CONTACT PHONE NO:			EMAIL ADDRESS:		
EMERGENCY CONTACT:			PHONE:		
Agreement: I agree to be bound by the Rules of the Association and The RESPECT Rules of U3A Bairnsdale & District Inc. and I agree/disagree (please circle) to my photo being used in U3A publicity.					
Signature: Date:					
As a not for profit organisation run by members help is needed in a number of ways. Please circle a way you could assist: Library, Archives, Minor Repairs, Tutor, Assisting Tutors with AV, Reception, Data Entry, Website, Facebook, Photographer, Other					
Previous Occupation/s (For Statistical Purposes Only)					
Payment Amount \$ Cheque Cash Direct Deposit EFT PayPal EFTPOS Cheques to be made payable to U3A Bairnsdale and District Inc - Direct Deposit and EFT BSB: 633000 Account No: 129944047					
CLASS/S YOU ARE ENROLLING IN	DAY	TIME	CLASS/S YOU ARE ENROLLING IN	DAY	TIME
OFFICE USE ONLY: AMOUNT PAID: RECEIPT NO:					