

	SURNAME:	
OFFICE USE ONLY		
	MEMBER NO:	

NEW MEMBERSHIP APPLICATION FORM 2023

CONTACT DETAILS	(Please write clearly)									
If making joint appl	ication please put both mem	nbers' names o	n this form.							
MEMBER 1 M				MEMBER 2						
Title: Mr Mrs I	Or other (circle)		Title: Mr	Mrs	Dr	other	(ci	rcle)		
Last Name:	Last Name: Last Name:									
First Name: First Name:										
Preferred Name:			Preferred Na	ame:						
Postal Address:										
Phone: Phone:										
Mobile:	Mobile: Mobile: :									
Email: Email:										
By providing my em	nail address I give permission	for this to be	used for U3A	Riverla	and co	mmuni	icatio	ns.		
MEMBER 1:	Male:□ Fei	male: 🔲 (tic	l (tick) Year of birth:							
MEMBER 2:	Male: D Fei	male: 🗖 (tic	l (tick) Year of birth:							
EMERGENCY CONT	ACT:									
Person to phone:			Phone No:				•••••			
ANNUAL MEMBERS	SHIP FEES									
		pires Dec 31 2023) .								
Joint \$50) (\$30 from July 1 2023)	(Expi	(Expires Dec 31 2023) Please circle type of membership			ip				
Sign										
Sign			for jo	int men	nbers	hip				
	permission for my photo to						erlar/	nd.	YES	S/NO

PAYMENT METHOD: CASH or CHEQUE (Please make cheque payable to "U3A Riverland Inc").

Post to: Treasurer U3A Riverland Inc, PO Box 1100, RENMARK SA 5341

ELECTRONICALLY: Name: U3A Riverland Inc BSB: 105-035 A/c No: 053462740 Please include **YOUR NAME** in the "description" so that it is evident who made the payment.

Receipts issued only on request.

OFFICE USE ONLY							
Payment:	Signature:	Amount:	Method:				
		\$20	\$30	\$50	Cash	Ch	BSB