

APPLICATION FOR MEMBERSHIP OF INDIGO U3A INC.

Personal Details:			
First name :			
Last Name :			
Preferred Name :			
Gender :	Female	Male	(Please circle one)
Member Type :	Member	Associate	(Please circle one)
Year of birth :			(for statistical purposes)
Contact Details:			
Unit Number :			
Street No and Name :			
Town:			
State :			
Post Code :			
Home Phone :			
Mobile Phone :			
Email :			
Other:			
Previous Occupation :			
Emergency Contact Details:			
Emergency Contact Name :			
Emergency Contact Phone :			
Emergency Contact Relationship :			
I wish to become a Member of Indigon I support the purposes of the Associa I agree to comply with the Rules of the	ation he Associatio	n	
(signature of Applicant)	(Date)		



Membership fees:

- 1. The Membership Fee is \$35 per Member for all renewing members
- 2. The Membership Fee is \$35 per Member for new members first joining on or before 30th September.
- 3. The Membership Fee is \$10 per Member for new members first joining on or after 1st October.
- 4. The Associate Member fee is \$10 per Associate Member for all new and renewing Associate members.
 - (note: an Associate Member is an individual who is already a "full" member of another U3A)
- 5. Initial Membership Fees become payable on joining.

 Renewing Membership Fees become payable on 1st January each year.

How to pay Membership Fees

You may pay Membership fees by any one of the following methods.

 By deposit to our bank account (EFT or over the counter at WAW) (other banks may charge a fee)

Account name Indigo U3A Inc.

Bank number (BSB) 803-070 Account number 100080300

Reference Your Member Number and your Name

(e.g. 1234 Mary Citizen)

2. By cheque through the post to (please DO NOT post cash)

The Treasurer Indigo U3A Inc. PO Box 305

Beechworth Vic 3747

Please include a note with your First and Last names