



The Saint Andrew Society of Western Australia

MEMBERSHIP APPLICATION

(PLEASE BLOCK LETTERS)

FULL NAME

.....

SPOUSE or PARTNER

.....

PREFERRED FIRST NAME(S)

.....

HOME ADDRESS

.....

..... POST CODE

HOME TELEPHONE

MOBILE PHONE

WORK PHONE

EMAIL ADDRESS

I/we apply for Membership of the Society and, if accepted, agree to abide by the Constitution (refer to the SASWA website).

I/we apply for (number of applicants) annual membership(s).

Membership subscriptions fee per person \$ 30.00

TOTAL FEE \$.....

Payment may be made by either of the following methods:

(1) Post this form and your cheque (made payable to 'The Saint Andrew Society of WA') to : The Hon. Secretary, The Saint Andrew Society of WA, Midland BC, PO Box 1212, Midland DC WA 6936.

(2) Email this form to enquiries@saintandrew.org.au and submit your fee by Electronic Funds Transfer to: The Commonwealth Bank; BSB: 066105; Acc No: 00901144 (please include your name)

SIGNED.....

Membership proposed by :

Membership seconded by :

Membership approved by the Committee on :

Date..... Signed (Hon Sec.)