



**MEMBERSHIP APPLICATION FORM**

I/We hereby apply for membership of The Australian Residents A.I. Association and also agree to abide by the rules and regulations laid out in the Memorandum of Association.

- Family: AUD 10.00 for 10 years
- Pensioner & Student: AUD 10.00 for 10 years
- Single: AUD 10.00 for 10 years
- Life membership: AUD 100.00 per person (does not include spouse)

Payment: Enclosed is my Cheque OR Paid by EFT \$..... (Please Circle one)

Banking Details are as follows:  
 Account Name: ARAIA  
 Bank Name: CBA  
 BSB: 062 004  
 A/C #: 10037988

NEW MEMBERSHIP / RENEWAL (Please Circle)

NAME:.....  
 (please print) Surname First Name

NAME OF SPOUSE:.....  
 (please print) Surname First Name

ADDRESS: .....

P/C:..... PHONE NO:.....MOB PH. NO. ....

EMAIL: .....

DATE:.....SIGNATURE:.....

For family membership, please list dependent children name and date of birth.

NAME: DATE OF BIRTH:  
 .....  
 .....

Assigned Membership No..... Note: Memberships are renewed in July.

**Please return completed forms and subscriptions to:**

**Ms C Conquest  
 Membership Secretary  
 PO Box 3051  
 North Strathfield NSW 2137**