Australian Residents & Anglo-Indian Association Inc.

ARAIA

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 20.00 for 1 year
- Single: AUD 10.00 for 1 year
- Pensioners & Students: AUD 10.00 for 1 year
- Life membership: AUD 250.00 per individual (does not include a spouse)

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

Banking Details are as follows:
Account Name: ARAIA
Bank Name: Commonwealth Bank of Australia
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:

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

Please return completed forms and subscriptions to:

Ms C Conquest
Membership Secretary
Email: araiamembership@gmail.com