

**MEMBERSHIP APPLICATION FORM**

**Surname:** \_\_\_\_\_ **Given Names:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Post Nominals:** \_\_\_\_\_

**Address:** \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

**Telephone:**

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_ e-mail: \_\_\_\_\_ B'Band: Y/N

Occupation current: \_\_\_\_\_ Occupation former: \_\_\_\_\_

*Are you interested in assisting the Society by using your former or current skills? Y/N*

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**Membership Type (please circle)**

Ordinary Membership

Family Membership

Junior Membership

**Membership Rates, including the Joining Fee of \$10.00:**

Ordinary: \$80

Family: \$100 plus \$20 per person after the first

Junior: \$30

**Family Membership ONLY**

Names of family members to be included in membership: 1. \_\_\_\_\_

2. \_\_\_\_\_ 3. \_\_\_\_\_

4. \_\_\_\_\_ Nominated Voting Member: \_\_\_\_\_

**Model Engineering Interests (Please circle):** Railways - Boats - Traction Engines - Clocks -  
Workshop Machinery - Other (Please specify)

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On completion, please return to the SECRETARY in person, or to the above Postal Address.

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**For Administration:**

Date received: \_\_\_\_\_ Registration Number: \_\_\_\_\_ AALS Insurance No. \_\_\_\_\_

Receipt No: \_\_\_\_\_

Nominated by (pls print): \_\_\_\_\_ Seconded By: \_\_\_\_\_ Meeting Date: \_\_\_\_\_

Signature: \_\_\_\_\_ : \_\_\_\_\_