

Membership Application Member Details

Type of Membership	Tick One ($\sqrt{\ }$)	Ordinary		Associate	e
Surname	First Name		Preferred Badge Name		
Address					
Post Code	Home Phone		Mobile		
Email Address					
Previous Occupation Current Interest					
Woodcraft Interests/E	xperience				
Spouse/Partners Deta How did you hear abo					
Hbw do you think you	could contribute to the benefit	t of the club?			
•	rmation (name, address, phonodocrafters use only. These de		•		Woodcrafters for the
	hereby acknov tion Incorporated (the Associa				
 The association does have public liability insurance The amount of insurance is \$20 million. I acknowledge receipt of this advice 					
• •	ify the association, its executi ligence) howsoever arising fro				e against any and all
Dated this	day of		20	_	
Signature of applican	t:C	10.B (optional)	//	_	
Witnessed by Member	- Signature	Print na	me or Membe	r Number	
HES Amount Paid Membership year is from Jan 1 to Dec 31. Joining Fee \$10.00 for New Members (includes Badge). \$10.00					
	s+ \$50 or (for New Members onl I (no pro-rata).	ly) \$4.50/month or pai	rt thereof to De		\$ \$ \$
Office use only	Membership Number		Badge		Receipt No
	Date Joined		Card		

If posting, please address to the Treasurer, Bribie & District Woodcrafters, P0 Box 528, Bribie Island, 4507.