



inspired by tradition

New

Renewal

**MEMBERSHIP APPLICATION FORM**

Membership #

TITLE (MR/MRS/MS/MISS) \_\_\_\_\_ SURNAME (COGNOME) \_\_\_\_\_

1<sup>st</sup> NAME (NOME) \_\_\_\_\_ COMPANY \_\_\_\_\_

ADDRESS (INDIRIZZO) \_\_\_\_\_

SUBURB \_\_\_\_\_ POSTCODE \_\_\_\_\_

PHONE (H) \_\_\_\_\_ (W) \_\_\_\_\_ MOBILE \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

OCCUPATION \_\_\_\_\_ D.O.B. (DATA DI NASCITA) \_\_\_\_/\_\_\_\_/\_\_\_\_

**MEMBERSHIP OPTIONS (PLEASE CIRCLE) PRICE INCLUDING GST**

**FAMILY: \$310.00 (inclusive of \$85 Club Credit)      SINGLE: \$295.00 (inclusive of \$85 Club Credit)**

**\*PENSION: \$110.00 (inclusive of \$30 Club Credit)      \*FAM PENSION: \$125.00 (inclusive of \$30 Club Credit)**

**\*PENSION/SENIORS CARD NUMBER:** \_\_\_\_\_

**\*\*SOCIAL: \$150.00 (POOL – DARTS – GOLF Club – (ITALIAN Classes with IAWCC Additional fees)**

**PLEASE CIRCLE which Activity you will be participating in**

**NOMINATION FEE \$25.00 (Only first time joining)**

*Membership is valid for 12 months from 1<sup>st</sup> October to 30<sup>th</sup> September. If joining mid-term, you will be charged pro rata. In October you will receive a membership renewal. SUBJECT TO APPROVAL BY WA ITALIAN CLUB (INC) COMMITTEE AND MEMBER*

**FAMILY DETAILS:**

PARTNERS NAME \_\_\_\_\_ D.O.B. (DATA DI NASCITA) \_\_\_\_/\_\_\_\_/\_\_\_\_

**BANK TRANSFER** BSB 016-416 ACC 287918416 Bank Reference Your Name .....

**CHEQUE:** Made Payable to WA Italian Club Inc. for \$ .....is enclosed

**CREDIT CARD NAME OF CARDHOLDER:** ..... MasterCard  Visa

EXPIRY: ...../..... CVV..... SIGNATURE .....

CARD NO:

**PROPOSER:** \_\_\_\_\_ **Signature** \_\_\_\_\_

**SECONDER:** \_\_\_\_\_ **Signature** \_\_\_\_\_

I/We agree to abide by the Constitution and Regulations of the Club

**SIGNATURE/S:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Office Use only**

Abacus	CRM	Membership Card	Email
Credit Card	Direct	Cash	Cheque