



MEMBERSHIP FORM

Welcome to Novocastrian Quilters Inc. This form must be completed by all NEW MEMBERS. Members can access a copy of the Constitution at Facebook <https://www.facebook.com/groups/1210923885664713/>

Please complete this form and return it with your ONE-OFF JOINING FEE and your FIRST ANNUAL MEMBERSHIP FEE (see below for fees). Annual Membership fees are renewable yearly in June.

I wish to become a member of the Novocastrian Quilters Inc and request that you enter my name on the Register of Members and accordingly I agree to be bound by your Constitution Rules or By –Laws.

Please use BLOCK letters.

Surname: _____	First Name _____
Address: _____	Suburb: _____
Postcode: _____	Phone: _____
Date of Birth (if under 18) _____	Parent/Guardian _____
EMAIL address for Newsletter : _____	

In order to comply with Federal Government privacy laws we need the following to be completed:

I give my permission for Novocastrian Quilters to supply another member of Novocastrian Quilters with my personal contact details (at the request of that member), (including my email and phone number). **YES/NO**

Under the provision of the Federal Government Privacy Act, use of names and references to quilt related matters and special events may only be published with the written consent of the person concerned. Do you agree to having such personal information mentioned in the Newsletter? **YES /NO**

I have read the above and understand the conditions of Membership.

Signed: _____ Date: _____

Please indicate payment by CASH / EFT (please circle)

BANK A/C Details for Novocastrian Quilters: **WESTPAC: BSB: 032-507 ACCOUNT NO: 137 643**

Please email copy of this form by to kathydallan@hotmail.com to confirm payment.

ADULTS: Joining Fee: \$15 and Annual Membership Fee: \$40 (or \$20 if joining between January and June)

JUNIORS under 18: Joining Fee: \$10 and Annual Membership Fee: \$10 (or \$5 if joining between January and June)

TOTAL:Adult: \$55 full year or \$35 half year (please circle)

Junior: \$20 full year or \$15 half year (please circle)

RECEIPT NO:.....