



NEW MEMBERSHIP APPLICATION

Please return completed form to
The Treasurer SHCUG, P O Box 1699, Bowral 2576

First Name _____

(Include additional family member's name if applicable)

Surname _____

Address _____

Town/Suburb _____ **POST CODE** _____

Phone () _____ **Mobile** _____

E-Mail Address _____

Please tick if MAC user:

SHCUG NEW MEMBERSHIP FEES are:

Single: \$35 plus a \$10 Joining Fee.

Family: \$50 plus a \$10 Joining Fee.

Members joining from the 1st of November of a given year will have Membership carried through to the 31st of December of the following year.

I enclose \$ _____ Cash or Cheque No _____ in payment for (please circle)
SINGLE / FAMILY Membership of SHCUG for year ending _____ (e.g. 31
December 2010).

For payment by Electronic Funds Transfer (EFT) please enter your name as shown above into the
'To Account Description' and transfer your fee to SHCUG's Bank Account of BSB: 641-800,
Account No: 200456000 and tick here:

SHCUG distributes Member Notices by e-mail. If you do not wish or are unable to receive these
communications by e-mail please tick here:

Signed _____ **Date** _____

PROPOSER _____ **SECONDER** _____

For Office Use _____