

**Canadian Club of W.A. Inc
Membership & Renewal Form**

- Individual Membership - \$25
 Family Membership - \$35

Date: _____

- | | |
|--------------------------|----------------|
| <input type="checkbox"/> | New Membership |
| <input type="checkbox"/> | Renewal |

Adults

BORN IN

| Surname | First Name | Occupation | Country | Prov. | City |
|---------|------------|------------|---------|-------|------|
| | | | | | |
| | | | | | |

(New members, please add a short bio about your family & how you found out about the Canadian Club)

Children

BORN IN

| Surname | First Name | D.O.B | Country | Province | City |
|---------|------------|-------|---------|----------|------|
| | | | | | |
| | | | | | |
| | | | | | |

Note: If more than 3 children, use back of form.

ADDRESS (Postal): _____ CITY: _____ POST CODE: _____

PHONE: HOME: _____ MOBILE: _____

EMAIL: _____

PAYMENT OPTIONS

PREFERRED - Direct Deposit- (Commonwealth Bank)

Account Name: Canadian Club of WA Inc

BSB: 066 140

Account: 10028046

Description: YOUR "**SURNAME**" & "**MEM**"

Please copy of your receipt & send/email with your membership form to: memberships@canadianclubofwa.com

Mail

Make cheque out to: Canadian Club of WA

Mail cheque & Membership Form to: Canadian Club of W.A.

18 THE GETAWAY

GOOSEBERRY HILL, WA 6076

- I want to be contacted about helping with events or being on a committee.
- I don't give permission to take & use my family's photo in the CCWA newsletter, etc.
- I want to order a name badge(\$15 per badge)- PLEASE PRINT name to go on badge. _____.

Office Use Only:

Pmt amt & type _____ Date Received _____ Entered in Database _____

Email entered _____ Welcome ltr _____ Committee _____