Cairns and District Woodworkers Guild Inc.

ANNUAL MEMBER APPLICATION FORM

Name	New Member*	Membership Renewal
Address		
Suburb		Post Code
Mailing Address (if different to above)		
Phone	Mobile	
Email	Date of Birth	/
Emergency Contact Person		
Name F	RelationshipI	Phone
Do you have any health conditions/impacapacity to safely operate machinery?	airments or are you on any medication	on that may affect your
\$50 Student Membership, aged 1 student applications Parent/Guardian Name: I,	13-18 years of age, tick this box.	ress)
herby give my consent for membership Signed by Parent/Guardian Comments/RestrictionsMedications		Date//
By signing the below, you confirm to and correct and you have read, und Guidelines & Policies of the Guild to	erstand, fully agree and have sig	ned a copy of the
Signed by Applicant		Date//
Proposed by Member name/number	seconded by	no/numbor Signaturo
*New Members only: A membership joining fe		
induction, name badge and administration feed. The current Annual Membership of \$80' renewing membership after this date wit able to use any of the facilities of the Gu Renewals received a month after renew required. Membership fees are also calculated on started term of Membership. (Example: New membership application \$20 + Joining fee.)	is payable before the 1 st of July of e ill be classed as a non-financial memi uild until membership is paid in full. al falls due may be subject to renewe a quarterly pro rata arrangement for	each year. Any member aber and therefor will not be ed joining fee payment being r persons joining during a
^ Aged Pensioners qualify for a \$5 redu All renewal fees are payable in advance the New Member joining fee. Payment Methods: In Person: Drop in to the Guild and return you EFT: Pay by bank deposit by listing your name. The Committee may at its discretion, accept the discretion of the Committee and decomposits.	prior to 1st July each year. Fees paid our completed form with your cheque or paid as reference to: BSB 034-664, Account of the prior reject any application for member	d after this date will attract payment to the duty person at 117258 ership. The decision will be solely
Office use only		
Receipt Number		