



UNIVERSITY OF THE THIRD AGE
IN THE NAMBUCCA VALLEY
ABN 94 948 200 504

MEMBERSHIP APPLICATION/RENEWAL FORM

SURNAME.....FIRST NAME.....

SURNAME.....FIRST NAME.....

POSTAL ADDRESS.....

.....Postcode.....

PHONE NUMBER.....EMAIL ADDRESS.....

Are you willing to receive information by email YES/NO (please circle)

Membership Fees, to be enclosed with this application, are \$25 annually for an individual or \$40 annually for a couple living at the same address. New members joining after 30 June in any year pay half of this amount.

In signing this application, I/we agree to be bound by the Constitution of U3A Nambucca Valley Association Incorporated and to abide by the Association's rules in respect of the conduct of courses and activities and the registration of attendances thereat.

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Signature of Applicant(s)

Date

(Office use only)

Amount Received \$..... Membership Number/s

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