



Canberra Quilters Inc MEMBERSHIP FORM

Please print clearly in BLOCK LETTERS

Name:

Address:.....

.....

Phone: (H)(W).....

(mob)

Email:.....

I am a (please tick)

- New Member (\$46)
- Continuing Member (\$46)
- Member returning after an absence (\$46)
- Junior Member (\$16.50)
- Optional: name badge (\$10)

TOTAL:

Print my name badge as shown here

Signature:.....Date:.....

Fee Schedule:

Annual membership is for one calendar year (1st January – 31st December)

Note: New members joining from 1st September each year will not be required to renew their membership until the end of the following year.

Accepted Methods of Payment:

Please tick.

- Direct Deposit:** either through a Commonwealth Bank branch or online directly from your account.

BSB: 062 909 Account Number: 00901010

Please make sure you include your name and reason for payment on the transaction

Credit card:

M/C: Visa..... Expiry Date: /.....

Name on card:.....

Card number:

Cardholder's Signature:

- Cheque:** make payable to Canberra Quilters Inc.

- EFTPOS or Cash:** at monthly meetings

Once you have chosen your method of payment please ensure this form is sent or given to the Membership Secretary, PO Box 935, Jamison, ACT 2614.

Office Use: Date:.....

Receipt #:.....

Membership #:.....

Badge Ordered: Yes/No



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