



MEMBERSHIP RENEWAL FORM

450 Squadron RAAF Association Incorporated

(incorporated under the Associations Incorporation Act 1984)

To renew your membership, please complete both front & reverse of this form **including your eligibility status and choice of membership period**, and return it with your payment to the Secretary.

Eligibility Status	Type	Voting Rights	FEES	
			Standard 12mths 2019	Bronze 2yrs 2019-21
Child of the 450 (over 18 yrs)	FULL	YES	\$25.00	\$49.00
Friend of the 450 Squadron RAAF	ASSOC.	NO	\$15.00	\$29.40
Child of the 450 (under 18yrs)	ASSOC.	NO	\$0.00	
Member of the 450 Squadron RAAF	LIFE	YES	\$0.00	
Spouse of a Member of the 450 Squadron RAAF	LIFE	YES	\$0.00	
Widow of a Member of the 450 Squadron RAAF	LIFE	YES	\$0.00	

Please circle your eligibility status and choice of membership period above.

I,
(full name of member– PLEASE PRINT)

Unique Membership No:(if known)

of
(full address – PLEASE PRINT)

.....
(Date of Birth)

.....
(occupation – PLEASE PRINT)

.....
(telephone number including Area Code)

.....
 Signature of Member

.....
 Date

Please complete one of the three Payment Options *Overleaf*:

Membership Fee PAYMENT OPTIONS

Please complete this section advising your method of payment.

Via CHEQUE/MONEY ORDER

[] My cheque/Money Order for \$..... is enclosed.

Made payable to: **450 Squadron RAAF Association Inc.**

Via DIRECT DEPOSIT

[] I deposited \$..... into the 450SQN Bank Account.

(please include your surname, or unique Membership number with online deposit)

DIRECT DEPOSIT BANK ACCOUNT DETAILS

BSB: **032 639** Account No: **16 6833**

Name: **450 Squadron RAAF Association Inc.**

Via ONLINE payment via PAYPAL through our Website

[] Please note I have made a payment via PAYPAL through
www.450squadronraaf.org.au

Remember to forward your completed membership form to the secretary when making an online payment. *Thank you*

The above payment, is based on my eligibility status and choice of membership period as noted overleaf.