



The Astronomical Society of the South West (Inc.)

Membership Application Form

Surname: _____

Given Name/s: _____
(Other family members to be nominated here if a family concession is required)

Address: _____
_____ Post Code: _____

Home Phone: _____ Work: _____ Mobile: _____

Email address (please print clearly): _____

Onlooker (Newsletter): email OR posted Add me to the email discussion list:

Membership Classification

Please Tick

Fees: Adult (16 & Over)	\$30.00	<input type="checkbox"/>	_____
Junior (Under 16)	\$20.00	<input type="checkbox"/>	_____
Family	\$50.00	<input type="checkbox"/>	_____
Concession	\$20.00	<input type="checkbox"/>	_____
Junior Family	\$35.00	<input type="checkbox"/>	_____
Nomination	\$5.00	<input type="checkbox"/>	_____
Associate (Onlooker Only)	\$15.00	<input type="checkbox"/>	_____
Astronomy Handbook (current year)		<input type="checkbox"/>	_____ (price varies)

If my application is approved, I agree to abide by the Constitution & Rules of the Society (refer website)

Signed by applicant: _____ Date: _____

Ages (if under 16): _____

Parent/Guardian (Print): _____ Signature: _____

Received (ASSW Council Member): _____ Date: _____

METHODS OF PAYMENT: Post this form to ASSW, PO Box 1100, Bunbury, WA 6231 with a cheque or money order for the total Nomination Fee and first year's Subscription Fee (DO NOT POST CASH)

OR

Submit this form to the Membership Officer at an any meeting (see the website diary page for meeting dates) with a cheque, money order or cash to cover the total Nomination Fee and the first year's Subscription Fee.

For additional information send enquiries to: enquiries@assw.org.au