



Association of Civil Marriage Celebrants of NSW & ACT Inc.

Registered No. Y1861513

MEMBERSHIP APPLICATION / RENEWAL FORM

Family Name: _____

Given Names: _____

Address: _____

Suburb: _____ Postcode: _____

Telephone: _____ Facsimile: _____

Mobile: _____

E-mail: _____

Web page: _____

What other language spoken: _____

**** PLEASE PRINT CLEARLY DEFINED CHARACTERS IN YOUR EMAIL & WEB PAGE ADDRESSES ****

Please tick the appropriate box below.

- FULL** Membership (Registered) Registration No: A_____
- RENEWAL** of Membership Registration No: **N**_____
- STUDENT** Membership (Awaiting Registration)
- EXISTING MEMBER** **NEW MEMBER**

May your contact details be given to other celebrants and/or couples?

YES NO

Signature: _____ Date: ____ / ____ / _____

MEMBERSHIP FEES: from 1 July to 30 June

FULL / RENEWAL Membership \$110 per annum

STUDENT Membership \$55 per annum

Please make cheque / money order payable to:

Association of Civil Marriage Celebrants of NSW & ACT Inc. and return it with this form to:

The Treasurer, Ms Jan Bastick, 81 Greenbank Drive, Glenhaven, NSW 2156

Office Use Only

Cash Cheque _____ Money Order _____

(Cheque number)

(Money Order number)

Amount Received: \$ _____

Receipt No: _____

Date: ____ / ____ / _____

Signature: _____