

ALMA DOEPEL SUPPORTERS CLUB INC (AO041293C)
P.O. BOX 5170, WEST HEIDELBERG, VICTORIA 3081
Email: adsc@almdoepel.com.au Phone: 0408 200 669

APPLICATION FOR MEMBERSHIP

I _____ (full name)
_____ (occupation) of _____ (street)
_____ (town/city) _____ (state) _____ (postcode)

desire to become a member of the **Alma Doepel Supporters Club, Incorporated.**

In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

_____ (signature of applicant) _____ (date)

Supplementary Information:

Home Phone: _____ Mobile: _____

Work Phone: _____ Email: _____

Membership Type: Single (\$20) / Family (\$30) (Please circle)

Payment Method: (Please tick)

- Cheque or money order payable to: Alma Doepel Supporters Club Inc.
- Electronic bank transfer (Please ensure that you include your name and reason for the bank transfer in the online description line. E.g: "SURNAME Membership")

Account Name: Alma Doepel Supporters Club
BSB: 06 3234
Account Number: 1035 1168
Bank: Commonwealth

Any other relevant details: _____

Office Use Only:

Details recorded: _____ (date)
Membership Card posted: _____ (date)