



*Alma Doepel Supporters Club Inc.*  
*Inc. No. A0041293C*  
*P.O. Box 5170*  
*West Heidelberg D.C. VIC 3081*  
*Ph: 0408 200 669*  
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### **ADSC MEMBERSHIP APPLICATION / RENEWAL FORM**

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:** (Please circle)

Single Membership (\$30)	Yes / No
Family Membership (\$40)	Yes / No
Donation	\$
<b>Total</b>	<b>\$</b>

#### **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") \*

\* Please note that if you opt to pay via this method you should still return this form to the ADSC, either electronically or via post.

Account Name: Alma Doepel Supporters Club  
BSB: 063 234  
Account Number: 1035 1168  
Bank: Commonwealth