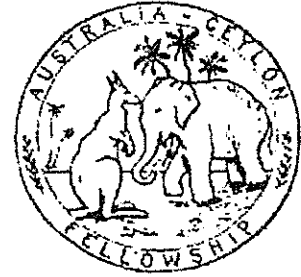


MEMBERSHIP APPLICATION/RENEWAL FORM

AUSTRALIA-CEYLON FELLOWSHIP INC

(REGISTRATION NO. A 0013324 S ABN 656 891 573 559)



Membership No: (Office use only)

ACCEPTED AT COMMITTEE MEETING ON / / 20 (Office use only)

Established 1957

I/We apply to become Member/s in terms of Section 5 of the A.C.F. Inc. Constitution

(Please tick appropriate box) Mr & Mrs Mr Mrs Ms Miss

FULL NAME:.....

ADDRESS:.....P/CODE.....

A/H:.....B/H:.....MOBILE:.....

Email Address:.....

SIGNATURE/S of Applicants:

MEMBERSHIP TYPE (Please tick appropriate box below)

Persons above the age of 18 years and who receive a Government Social Pension and/or benefit such as a Health Care Card OR are one of a couple who is 60 years of age or over may apply for CONCESSIONAL membership whilst all other persons over the age of 18 years may apply for ORDINARY membership.

ORDINARY FEES \$20.00 per Year **CONCESSIONAL** FEE \$15.00 per Year
Enclosed appropriate amount in favour of ACF

PROPOSED BY:.....Signature:.....

SECONDED BY:.....Signature:.....

Dated: / /20

Renewal of Membership Subscriptions - Membership No:.....

Membership Fees is for a calendar year (1st July to 30th June)
Please complete **ONLY IF** any of these details have changed. Otherwise return this section after inserting your Membership No. with your remittance.

NAME of Member/s:.....

ADDRESS:.....P/CODE:.....

Telephone Contact Numbers:.....

Email:.....

Please make payment to the **Commonwealth Bank BSB No. 063615 A/c No. 10034511**

or make cheques payable to A.C.F. Inc. and mail to:

The Membership Chairman, Ruby Diaz, 38/63-83, James Street, Dandenong 3175.