

# APPLICATION FORM

To  
**Central Queensland Family History Association Inc.**

Surname \_\_\_\_\_ Given Name \_\_\_\_\_

Address \_\_\_\_\_

Home phone \_\_\_\_\_ Business \_\_\_\_\_

Email Address \_\_\_\_\_

**IMMEDIATE FAMILY MEMBERSHIP - AT THE SAME ADDRESS**

Surname \_\_\_\_\_ Given Name \_\_\_\_\_

Address \_\_\_\_\_

**MEMBERSHIP FEES - effective from 1 July  
ANNUAL PERIOD 1<sup>ST</sup> July to 30 June**

<b>Single membership</b>	<b>\$35.00</b>
	<b>Plus \$5.00 if journal is required to be posted</b>
<b>Immediate Family Membership</b>	<b>\$45.00</b>
	<b>Plus \$5.00 if journal is required to be posted</b>
<b>Overseas Membership</b>	<b>\$40.00 (Aust) includes postage</b>
<b>Journal Only</b>	<b>\$20.00 within Australia includes postage</b>
	<b>\$30.00 (Aust) for overseas</b>

I/We hereby apply for SINGLE / FAMILY membership to the Central Qld Family History Association Inc. and agree, if accepted to be bound by the rules of the Association.

(Delete whichever is not required)

Note: Pro Rata membership fee is available when joining during the financial year.

Application will be submitted to the next Committee meeting for approval. An Interim membership card/cards will be issued pending approval.

\_\_\_\_\_  
Members Signature

\_\_\_\_\_  
Additional Members Signature

Dated:        /        /

Dated:        /        /

.....

Date received        /        /

Receipt No : I.

Membership No:

**Application approved / rejected        /        /**