

U.S.F.A. MEMBERSHIP APPLICATION FORM

Memberships PO Box 362 Brookvale NSW 2100
 No: 0413 033 224..... Email: memberships@usfa.com

USFA
 Phone

Have you been a member before? Yes No New Renewal

Title (please circle) Mr Ms Mrs AUF Number

First Name

Middle Name

Last Name

Postal Address

Town/Suburb

State Postcode

Phone (Priv)

Mobile

Date of Birth (DD/MM/YYYY)

Email

State which CLUB or INDEPENDENT Please tick

PAYMENT OPTIONS Cheque Money Order Cash

Enclosed is the payment for the amount of \$

Mastercard Visa Expiry Date

Card Number

Cheques payable to the U.S.F.A. Signature..... Affiliated with the A.U.F.

Payment by Direct Deposit Please tick Bank: **St George** Account Name: **USFA**
 Account No: **482 582 356** BSB No: **112-879**

Specify surname or AUF No for identification of payment
 All mail to: **USFA Memberships, PO Box 362, Brookvale, NSW 2100**

SLIDING SCALE
 Only applies to NEW members or to those who have let their membership lapse for two years or more. Renewals are due by June of each year.

	SENIOR	JUNIOR
Winter (Jun Jul Aug)	\$48	\$30
Spring (Sep Oct Nov)	\$36	\$22.50
Summer (Dec Jan Feb)	\$24	\$15
Autumn (Mar Apr May)	\$12	\$7.50

1 Year	\$48 SNR	<input type="checkbox"/>	JNR \$30	<input type="checkbox"/>
5 Year	\$220 SNR	<input type="checkbox"/>	JUN \$135	<input type="checkbox"/>

ALL APPLICANTS READ & SIGN - I hereby have made this application in full recognition of the USFA & AUF's requirement for responsible & ethical behaviour. I undertake to do all in my power to preserve the good image of the sport. I understand & agree to abide by the constitution, by-laws, rules & regulations of the association & any transgression will be subject to possible suspension or expulsion.

SIGNATURE..... DATE.....