



APPLICATION FOR DRC ASSOCIATE MEMBERSHIP OF EFCPP&OA

I wish to apply for a DRC Membership which will include an Associate Membership of the EFCPP&OA, and in so doing, agree to be bound by the Constitution of the EFCPP&OA.

I understand and agree with the benefits available to me as an Associate Member and agree to pay the amount of \$50 (the current fee for this membership which may change in future years) to the EFCPP&OA for my Membership.

My details are as follows: Male/Female (Cross out not applicable)

Address:.....

Email address:.....

Main phone contact:.....Date of birth (not compulsory).....

Signed..... Date.....

Methods of payment:

Cheque/Money Order made payable to EFCPP&OA.

EFT: Bendigo Bank BSB 633 000, Account no. 158 469 734, in the name of the EFCPP&OA and use your name as the reference.

CREDIT CARD: Type- Master Card Visa

Card No:.....Expiry date:.....

Name on card: CCV :.....

Please return this form to the Treasurer, Ken Gilbertson, by email, to

treasurer@efcppoa.com.au

or by post, to P O BOX 455, ESSENDON NORTH, VIC 3041