

KINGLAKE MODEL FLYERS CLUB INC

ASSOCIATION NO – A0048576X



APPLICATION FOR JOINING

Or MEMBERSHIP RENEWAL

For the period July 1st 2011 to June 30th 2012

Only one applicant per form (multiple applications will not be considered)

Please print clearly in **blue** or **black** ink and give names in full – avoid nicknames or abbreviated names.

Name: _____

Address: _____

Postcode _____ e-mail _____

If you would like your VMAA Newsletter sent to you electronically tick this box -

Date of Birth / / Home Phone No. _____

Mobile Phone No. _____

Current MAAA / VMAA License Number _____

Radio Frequencies Used 1. _____ 2. _____ 3. _____

(tick applicable box)

New Member Joining Fee _____ \$20.00

K.M.F.C. Senior Membership Fee _____ \$50.00

K.M.F.C. Pensioner Membership Fee – (Supply pensioner number) _____ \$40.00

K.M.F.C. Junior Membership (up to 18 years at start of membership year) No charge.

MAAA / VMAA Fee Senior _____ \$110.00

MAAA / VMAA Fee Junior _____ \$55.00

Field Key Deposit _____ \$30.00

(Only payable for new members / replacement keys)

Total Payment Due \$

If you have Registration and Insurance through another club, please indicate the club name and your membership expiry date below. You must also provide a photocopy of your club receipt showing payment of current MAAA / VMAA fees.

Club _____ Exp Date / /

DECLARATION

I agree, upon acceptance of this application, to be bound by the rules and constitution of the Kinglake Model Flyers Club Inc. I also recognize that acceptance of this application is not automatic and may be subjected to conditions at the time of application.

Applicant Signature _____ Date / /

Payment by Cheque and Money Orders should be made payable to **Kinglake Model Flyers Club Inc.** and forwarded together with this form to:

**The Secretary
Kinglake Model Flyers Club
580 Extons Road
Kinglake Central Vic. 3757**

To pay direct or on-line the Bank Account is -Kinglake Model Flyers Club Inc
- Bendigo Bank 633-108
-Account Number – 127668309

Then send this form to the above address

OFFICE USE ONLY

NEW MEMBER _____

Proposed By _____ Seconded By _____

Signature _____ Signature _____

Date _____ Date _____

Receipt Number	Details Correct	All Signed
Money Order / Cheque Number	Membership Number Given	Field Key Number.

All enquiries – Phone David Collyer – 03 5786-1389

e-mail –kadarinaberries@aussiebroadband.com.au