



M E M B E R S H I P F O R M

Full Member: Application fee: \$100.00, Annual subscription: \$200.00

Social Member: Application fee: \$50.00, Annual subscription: \$100.00

Membership Class	
Name	
Blood Group	
Address	
Phone Number	
Date of Birth	
Email Address	
Emergency Contact Name & Tel No.	
Signature (and Guardian if Under 18)	

Proposer: _____

Seconder: _____

Date: _____

For official use only

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