



## APPLICATION FOR MEMBERSHIP OF ASSOCIATION (Rule 3(1.))

I, .....  
PRINT FIRST NAMES PRINT SURNAME

.....  
PRINT ADDRESS

.....  
PRINT EMAIL ADDRESS PHONE NUMBER

am over the age of 18 and hereby apply to become a member of Goulburn & District Art Society Inc. (GDAS). If accepted, I agree to comply with its constitution (<http://www.artsociety.goulburn.net.au/pdfs/ModelConstitution.pdf>), rules and regulations as they vary from time to time.

.....  
SIGNATURE OF APPLICANT DATE

I prefer my newsletter and correspondence to be  EMAILED or  
 POSTED (PLEASE NOTE: EMAILING SAVES GDAS MONEY)

**PAYMENT**  FULL PAYMENT (1 July - 30 June) **\$30**  
 PRO RATA 1 (1 January - 30 June) **\$15**  
 PRO RATA 2 (1 April - 30 June) **\$10**

**MADE BY**  DIRECT DEPOSIT  
BENDIGO BANK BSB 633-000  
Acc. No. 200104032  
Reference: (*Applicant's Name*)

CASH

CREDIT CARD (PLEASE PROVIDE) .....

NAME ON THE CARD

### OFFICE USE ONLY

Date:

Receipt No:

.....  
CARD NUMBER EXPIRY DATE 3 DIGITS AT THE BACK OF THE CARD

### ABOUT YOUR ART EXPERIENCE (OPTIONAL)

1. Please tick the one that best describes your art experience:

BEGINNER  INTERMEDIATE  ADVANCED

2. Please outline briefly your art experience:

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.....  
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