

Adjustment if Necessary

Receipt #

QUEENSLAND LINE DANCE ASSOC Inc.

MEMBERSHIP FORM

The membership year is from 1^{st} July until 30^{th} June annually.

MEMBERSHIP COST (up to 30 June): \$20.00 [\$30 if you want to have the Newsletter posted.]

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|---|--|---|----------------------------|--------------------|----------------------------|--|
| NAME | | | | | | |
| POSTAL ADDRESS | | | | | | |
| SUBURB/TOWN | | | | STATE: | POST CODE: | |
| PHONE NUMBER | | | | | | |
| MOBILE NUMBER | | | | | | |
| EMAIL ADDRESS | | @ | | | | |
| □ NO EMAIL ADDRESS | | | | | | |
| \square I would like to have the newsletter posted to me at an extra cost of \$10 per year as I have no email address. | | | | | | |
| WHAT CLUB DO YOU DANCE WITH? | | | | | | |
| ARE YOU AN | | ☐ YES | IF YES: WHAT IS THE NAM | E OF YOUR CLUB? | WHERE DO YOU TEACH? | |
| INSTRUCTOR? | | □ № | | | | |
| Our newsletter will be distributed monthly to all members via email. If you have no email address you may elect to have the newsletter posted to you each month at an extra cost of \$10 per year. All members will receive discounts to QLDA events where they are offered by the host club. | | | | | | |
| TO BECOME A MEMBER OF QLDA PLEASE SELECT ONE OF THE FOLLOWING OPTIONS. | | | | | | |
| OPTION 1 \square | Complete | nplete this Membership Form and hand it to a QLDA Executive Member with \$20/\$30 cash. | | | | |
| OPTION 2 | | omplete a Bank Transfer or Deposit your money into the following CBA account. Please ensure that you ld your name to the transfer information so we know who has deposited this money. BSB: 064-408 ACC#: 1013 2768 ACC Name: QLDA | | | | |
| | | Complete this Membership Form then scan and email the form along with your Transaction Receipt of the above deposit to: info@queenslandlinedance.com | | | | |
| OPTION 3 | Complete this Form and post it along with your Cheque/ Bank Cheque / Money Order to: | | | | | |
| | QLDA Membership Coordinator, 29 Oakes Street, CHILDERS QLD 4660 (Receipts will be issued on payment. Make cheques etc payable to "Queensland Line Dance Assn Inc.) | | | | | |
| I WISH TO BECOME A MEMBER OF QUEENSLAND LINE DANCE ASSN INC. AND AGREE TO ABIDE BY THE RULES OF THE ASSOCIATION. | | | | | | |
| SIGNED: DATED: | | | | | | |
| Office use only | | | | | | |
| Payment amount | | Paid to |) | Membership # | | |

Date Joined