



New England Model Railway Club Inc.

Application for Membership

(Please print clearly in block letters)

SURNAME		GIVEN NAME(S)	
ADDRESS			
TOWN	STATE	POSTCODE	
PHONE	E-MAIL		
OCCUPATION	SPOUSE (Optional)		

Please indicate (✓) the type of membership required: Adult (\$40) Student (\$15) Family (\$50)

(Note: For family membership, please advise the names and interests of each family member. A separate form may be used)

MODELLING INTERESTS

Scale _____ Prototype _____

Visitors _____ (N = None; BI = By invitation; CF = Contact first)

Please indicate below, which details you wish to include in the Membership Directory.

Name: YES/NO Address: YES/NO Phone: YES/NO Spouse: YES/NO
 E-mail: YES/NO Scale: YES/NO Prototype: YES/NO Visitors: YES/NO

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Declaration

I, _____ hereby apply for membership of the New England Model Railway Club Inc and I declare that by the payment of all due fees, I agree to abide by the constitution and rules of the Club.

Signature: _____ Date: _____

Send this application and appropriate fee to the address below:

The Membership Officer
 NEMRC
 C/- 17 Weaver Ridge
 ARMIDALE NSW 2350

<i>Office use only</i>		
Date received: ___ / ___ / ___	Amount received: \$ _____	Receipt No: _____