

## AUSTRALIAN INDIAN SENIORS ASSOCIATION, INC. APPLICATION FOR MEMBERSHIP

	Date of the Application
I wish to become a Member of Australian Indian Seniors Asso Purposes of AISA and comply with its Rules.	ociation (AISA), and if my membership is approved I will support the
Membership Category Applied for: Member (Age 60 years	s or over) Assoc. <b>Member</b> (Age below 60 years)
Name of the Applicant (in <b>CAPITAL LETTERS</b> please):	
Title (Dr/Mr/Mrs/Ms)	First Name
Last Name	
Telephone: Mobile:	Landline
Email	
Residential Address	Postal Code
Emergency Contact Name, Phone, Relation	
Member Information:	
Joining Fee for Member	r / Associate Member: \$5.00 (payable once upon joining)
Annual Membership Fe	e for Member / Associate member: \$5.00 (payable every year, due on 1st of July)
Life Membership Fee fo	<b>Dr Member</b> : \$50.00 (payable once in lifetime)this option is not available for Associate Members.
Signature of the Applicant	
Proposed by	Seconded By
Lodging the Application:	
and submit the signed Application Form, and to pay can be submitted online to the above email address, (BSB: 033 385, Account No. 088891, Account Name	nail.com, or any Management Committee member, to obtain the applicable fee by cash, cheque or online. The application with payment directly deposited in AISA's bank account at Australian Indian Seniors Association. When making description so that the Treasurer can correctly identify your olicant).
Application Approval Notification: Your application Meeting and you will be informed of the outcome by	n will be considered for approval at the next Committee email.
For Official use only:	
Fee paid \$ Cash/ In Bank. Application/ Fee of	collected by date
Application approved by AISA Executive Committee	on (date)
Assigned Membership No	