

Australian Federation of Cemetery Friends Inc.

APPLICATION FORM TO BECOME A MEMBER

(Please print clearly)

I,,
(Name)

of,
(Address)

desire to become a member of the Australian Federation of Cemetery Friends Inc. (A0052464A).

In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

.....
(Signature of Applicant)

.....
(Email address)

All members have access to the Members' Area of our website www.afocf.org/members.htm. To access the Members' Area, please nominate an eight character password.

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Date: / / 2009

ANNUAL MEMBERSHIP TO 30 JUNE 2010

- | | | |
|--------------------------|--|------------|
| <input type="checkbox"/> | Cemetery Friends' groups | \$A 25.00* |
| <input type="checkbox"/> | Corporate/organisations | \$A 30.00* |
| <input type="checkbox"/> | Individuals | \$A 25.00* |
| <input type="checkbox"/> | Individuals (members of affiliated groups) | \$A 20.00* |

Yes, I would like to make a donation to the Australian Federation of Cemetery Friends Inc.

\$A _____

TOTAL: \$A _____

Please return this application form with your cheque or money order (no cash) made out payable to "Australian Federation of Cemetery Friends Inc.":

Australian Federation of Cemetery Friends Inc.
PO Box 293
KEW VIC 3101

*includes joining fee of \$A10