



RETIRED FIREFIGHTERS ASSOCIATION OF AUSTRALIA (WA Branch Inc)



APPLICATION FOR MEMBERSHIP

I, the undersigned, hereby make application to become a member of the above association and agree, if admitted, to act in accordance with the rules and resolutions of the association.

SURNAME: _____

GIVEN NAME: _____ **KNOWN AS:** _____

DOB ___/___/___

ADDRESS: _____

SUBURB: _____ **POSTCODE:** _____

PHONE: _____ **MOBILE:** _____

SPOUSE: _____ **SERVICE NO:** _____

EMAIL: _____

SIGNATURE : _____ **DATE:** ___/___/___

Please find enclosed a cheque/money order

or:

Payment has been made by EFT to P&N Bank:

BSB 806-015 Account No. 0330 5257

(Please use surname as payment reference)

for the amount of \$20.00 for 12 month membership (NB: Membership can be paid up in advance for as many years as you wish).

Post application, and cheque or money order, to:

Secretary

Retired Firefighters Association of Australia (RFFA)

c/o 21 View Street

NORTH PERTH WA 6006

Or email application to:

rabeale@bigpond.com