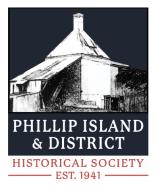
Phillip Island District Historical Society Inc.

Office: 0466 049 755 www.phillipislandhistory.org.au

President: Doug Waugh Secretary: Pamela Rothfield



APPLICATION FOR MEMBERSHIP

| Full Name/s: | | | |
|--|-----------------|-----------------|-------------|
| Residential Address: | | | |
| | | Postc | ode |
| Email: | | | |
| Postal Address (if different from abov | ve): | | |
| | | Postc | ode |
| Telephone: | | | |
| I wish to receive Minutes and Newsle | tters by e-mail | Yes | No |
| I consent to my name and contact deta supplied to other members of the PID | | Yes | No |
| I support the purposes of the PIDHS and agree to comply with the rules as contained in the Constitution (refer PIDHS website). Your contact details will not be divulged to outside organisations without your consent. | | | |
| Signature: | | Date: | |
| Payment options:Cheque, Money Order or Bank TransferAccount Name:Phillip Island & District Historical Society Inc BSB 633-000BSB 633-000Account No. 151829389Please use your surname as the reference. | | | |
| Annual membership fee | Single \$30.00 | Fam | ily \$40.00 |
| Please return signed form and memb Pamela Rothfield Secretary PIDHS PO Box 816, Cowes, 3922 or emai | - | dhistory.org.au | |