**University of the Third Age Hawkesbury Inc.**
*PO Box 120 Richmond NSW 2753 (4578 2333)*
*ABN 65882441350*
*Email: u3ahwkby@norwestit.com.au*
*Webpage: hawkesbury.u3anet.org.au*

# MEMBERSHIP FORM ï 2022 RENEWAL ☐ NEW MEMBER ☐

| | | | |
|---|---|---|---|
| **Name** | | **Member Number** | |
| **Address** | | **Postcode:** | |
| **Telephone** | | **Mobile** | |
| **Email address** | | | |
| **Emergency contact & phone** | | | |

**How do you wish to receive your Newsletter and Class Calendar?** *Please choose*:

☐ **Email** ☐ **Collect from Office** ☐ **Postage** (Costs $5 extra)

**Membership Type and Fees:** Please choose:

☐ **$25.00** Single ☐ **$40.00** Joint membership ☐ **Plus $5 Postage** (if required)

☐ Associate Member (No fee - Tutor only) ☐ Life Member

**Note:** Membership is due on January 1st each year. Membership fees paid after 30 September will take your membership through to the following year without further fees.

**Method of Payment:** Please choose. Note that there is no provision for credit card payments

☐ **Pay in person at the Office, at:**
Hawkesbury Skills, Bosworth St, Richmond
Monday: 9.30am to 12 noon
Wednesday: 10am to 12 noon
Friday: 10am to 12 noon

☐ **Pay by cheque or money order**
Posted to PO Box 120 Richmond 2753

☐ **Pay by Bank Transfer**
Arrange a transfer to the following account:
Account Name **U3A Hawkesbury Inc.**
BSB **062595**
Account number **10338864**
To enable identification of your payment, add your First Initial and Surname in the Reference field.

**Note:** You will need to deliver, post or email this form to the office, along with your completed class enrolment form.

| | |
|---|---|
| **Please list any topics/subjects for which you would be prepared to act as course leader** | |
| **Are you able to help with occasional office duty?** | |

**If you are you able to assist members who may require transport, please notify your Tutor**

***Please tick relevant box:***

☐ **YES** I am enrolling in a class or classes and **my Class Enrolment Form is attached.**

☐ **NO** I do not intend to enrol in a class at this time.

**I hereby apply to join/renew my membership of U3A Hawkesbury Incorporated and agree to be bound by the rules of this association.**

| | | | |
|---|---|---|---|
| **Signature:** | | **Date:** | |

**OFFICE USE ONLY:**

Double Vax Evidence: ☐ Date: é é é é é é é .. Sighted by: é é é é é é é é é é é é é é

Membership Card é . Dateé é é é é é Computer Recordé é é é é é Email Record: é é é é é .