

Sarina Show Society Inc.  
 PO Box 119  
 SARINA QLD 4737  
 Ph: (07) 4956 1066  
 Fax: (07) 4956 2036  
 Email: sarina.showsoc@bigpond.com.au



PRIVACY STATEMENT: The information provided by each member is used by the Society to administer and provide Member benefits. Your information will not be disclosed without your permission.  
 (PLEASE PRINT)

<b>MR MRS MS MISS MASTER (please circle)</b>	<b>SURNAME:</b>	<b>FIRST NAME:</b>
<b>RESIDENTIAL ADDRESS:</b>		<b>TOWN:</b>
		<b>STATE:</b> <b>POSTCODE:</b>
<b>POSTAL ADDRESS:</b>		<b>TOWN:</b>
		<b>STATE:</b> <b>POSTCODE:</b>
<b>DAYTIME PHONE NUMBER</b>	<b>MOBILE:</b>	
<b>EMAIL ADDRESS:</b>		<b>DATE OF BIRTH:</b>

<input checked="" type="checkbox"/>	<b>PLEASE TICK WHERE APPLICABLE – separate form to be used for each family member</b>		
	YEARLY FAMILY MEMBERSHIP – 2 Adults & all Children 15 Years & Under	\$ 50.00	ANY AGE (Adult & Junior)
	YEARLY SINGLE MEMBERSHIP – 1 Adult	\$ 25.00	ANY AGE (Adult & Junior)
	LIFE MEMBERSHIP – 1 Adult	\$100.00	16 Years and Above
	JUNIOR LIFE MEMBERSHIP – 1 Child (Must have parent or guardian as full financial Life Member)	\$ 20.00	15 Years and Under

<input checked="" type="checkbox"/>	<b>PAYMENT DETAILS</b>		
	CHEQUE/MONEY ORDER/CASH Please Note: Cheques & Money orders payable to the Sarina Show Society Inc. AMOUNT: \$		
	CREDIT CARD Please Note: Sarina Show Society does not accept Diners or American Express AMOUNT: \$ NUMBER: _____ Expiry Date: _____ CCV: _____		
	DIRECT DEPOSIT – BANK DETAILS – BENDIGO BANK ACCOUNT NAME: SARINA SHOW SOCIETY INC.      BSB: 633-108 ACCOUNT NUMBER: 146042494 Please Note: Put your name and Membership in deposit details		

<b>MEMBER SIGNATURE</b>	<b>DATE:</b>
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<b>OFFICE USE ONLY</b>		<b>MEMBERSHIP NUMBER:</b>		
<b>MEMBERSHIP STATUS (CIRCLE)</b>	<b>YEARLY FAMILY</b>	<b>YEARLY SINGLE</b>	<b>LIFE MEMBERSHIP</b>	<b>JUNIOR MEMBERSHIP</b>
<b>PAYMENT RECEIVED</b>	\$	Date:		
<b>CHEQUE/MONEY ORDER</b>	Number:	Bank:		
<b>DIRECT DEPOSIT</b>		Date Received:		