

## Children's Safety Australia Inc. Tax Invoice:

## Membership Form 2010/11

PO Box 202, Corinda Qld 4075 Email: admin@childsafety.org.au Tel: (07) 3379 4475 ABN 28 100 589 195

Note: This information is for Children's Safety Australia Inc. records only and will remain confidential

Your Details						
Name (in full):						
Address:						
Telephone:	Business hrs:	After hrs:	Mobile:			
Email address:						
Occupation:						
Membership Details						
Please indicate the option that applies to your membership application/renewal:						
a) I wish to apply for the 2010/2011	No fee payable for members joining July - August 2010					
b) To renew ordinary membership for the sum of \$10.00 being membership for the 2010/2011 financial year (concluding 30 June 2011).						
b) I wish to apply						
I agree to abide by the Children's Safety Australia Inc. Rules of Incorporation and rules set by the management committee. I enclose with this application the applicable sum for the membership type applied for.						
Signed	Dated:					

## **Payment of Dues:**

Membership dues can be paid via:

- a) Electronic funds transfer into the Children's Safety Australia Inc. account (BSB: 704052; Account: 1036202). Please use your first initial and last name as reference; or
- b) Cheque or money order (payable to 'Children's Safety Australia Inc.') to PO Box 202, Corinda Qld 4075.

Please Note: Children's Safety Australia Inc. is not currently the holder of public liability insurance.