Eudlo Hall & Grounds Association Inc.

("the Association")

Application for Membership (post to PO Box 37 Eudlo 4554 or scan to secretary.eudlohall@gmail.com)

		(Full name	, block lette	rs, surname	last)	
of						Postcode
			(Residenti	ial address)		i ostcode
hereby ap Rules of th	•		•	•	and in doing so I a	gree to abide by the
My membe	rship fe	ee of \$10.00	for membe	ership until	30 June, 2025 is e	nclosed/deposited
direct to.	BSB	638-070	A/c No	129601	79	
		ssociation's " verleaf and I			of the Association	Members' Personal
appear b) my deta have su	in the F ails fron pplied l	Register of Mon The Registe Below, may b	embers, w r of Memb e circulate	hich may bers, and ored to staff	e inspected by any nly those personal and Members of th	Contact Details that I
		S	ignature			Date
App	olicants	who have no	ot previous	sly been a i	nember must have	their application
		propos	ed and sed	conded by	existing members -	-
Proposed I	sed by: Seconded by:					
		(Full names,	block letters	, surname last)	
	Signa	ature	Dat	 te	Signature	Date

Eudlo Hall & Grounds Association Inc.

POLICY ON THE PRIVACY OF MEMBERS' PERSONAL DETAILS

- •A member's full name and residential address must be entered into the Register of Members, which, by Law, may be inspected by other members.
- •We will collect other information to allow the Association's Management Committee, and authorised staff, to contact members.
- •We will not disclose any information that we gather about a member to any third party,

unless the member has given the Secretary written consent to release that information.

•A member may withhold any of the 'Contact Details' and may add to, amend or delete any detail by giving written notice to the Secretary.

Contact details (which are	e kept IN CONF	IDENCE)							
Full name (in block letters, surname last)									
Mailing address									
		Post Co	de						
Business hours phone number									
Fax number									
Mobile phone									
Email		_							
After hours phone									
Other details you may wish to include, eg. partner's name									
Management Committee Use MEMBERSHIP FEE Fee paid by									
Details	3	Receipt Number	Date						
Direct deposit									
Postal order									
Cash									