



MEMBERSHIP APPLICATION

Application for membership of the Asbestos Diseases Society of Victoria Inc.

(Membership period is from the 1st of March to the last day of February - inclusive)

Name: _____

Address: _____

Phone: Home (_____) _____

Work (_____) _____

Mobile _____

Email: _____

I apply to be a member of the Asbestos Diseases Society of Victoria Inc. In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

Signature of applicant: _____

Date: _____

*Please note that membership is subject to acceptance by the Committee of the Asbestos Diseases Society of Victoria. Your details will remain confidential on our database. We do not supply our list to other organisations.

Annual Membership Fee Pensioner/Concession \$10.00 (GST inc)

Employed persons \$25.00 (GST inc)

Payment Methods Credit Card Cheque Money Order
(please tick one)

Credit card payments can be made by visiting our website www.adsvic.org.au and going to *Get Involved*.

Cheques and Money Orders are also accepted. Please make cheques or money orders payable to:
Asbestos Diseases Society of Victoria and send to:
ADSVIC, P.O. Box 983, South Melbourne, Vic. 3205

Office use only

Committee member acceptance:

Name: _____

Date: _____

Signature: _____