



AUSTRALIAN TAMIL CONGRESS

One Voice for All Tamils

ABN: 97 138 993 852

6 Third Avenue Rossmoyne, WA 6148, Australia

MEMBERSHIP APPLICATION / RENEWAL FORM 2009/10 – FORM A

MEMBER DETAILS (Please print clearly and in block letters)

Please Tick: New Membership Renewal

Title (Dr/Rev/Mr/Mrs/Ms/Miss)

Surname _____ First Name _____

Street _____

Suburb _____ State _____ Postcode _____

Occupation _____

Phone (AH) _____ Phone (BH) _____ Fax _____ Mobile _____

Email _____ @ _____

MEMBERSHIP DUE

INDIVIDUAL MEMBERSHIP \$100.00 per year \$100.00 ATC Growth Fund (Optional)

LIFE MEMBERSHIP \$2000.00

METHOD OF PAYMENT (Please Tick)

Cheque / Money order Monthly Standing order Cash

HOW TO PAY

Please post your completed application and payment (cheque/money order ONLY) to:

Australian Tamil Congress,
6 Third Avenue,
Rossmoyne, WA 6148,
Australia.

Cash payments can be made at the Australasian Tamil Congress office at the above mentioned address.

ELECTRONIC COMMUNICATION

Tick here to indicate your consent to receive announcements and newsletters in electronic format (Email and SMS)

Signature of the Applicant _____ Date ____/____/20__



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MEMBERSHIP APPLICATION / RENEWAL FORM 2009/10 – FORM B

MEMBER DETAILS (Please print clearly and in block letters)

Please Tick: New Membership Renewal

Title (Dr/Rev/Mr/Mrs/Ms/Miss)

Surname _____ First Name _____

Street _____

Suburb _____ State _____ Postcode _____

Occupation _____

Phone (AH) _____ Phone (BH) _____ Fax _____ Mobile _____

Email _____ @ _____

MEMBERSHIP DUE

ASSOCIATE MEMBERSHIP \$50.00 per year \$50.00 ATC Growth Fund (Optional)

Type of Identification Provided: Pensioner Concession Card: _____

Student Identity Card: _____

METHOD OF PAYMENT (Please Tick)

Cheque / Money order Monthly Standing order CASH

HOW TO PAY

Please post your completed application and payment (cheque/money order ONLY) to:

Australian Tamil Congress,
6 Third Avenue,
Rossmoyne, WA 6148, Australia.

Cash payments can be made to the Treasurer of the local ATC Chapter.

ELECTRONIC COMMUNICATION

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Signature of the Applicant _____ Date ___/___/20__