U3A NEW MEMBER ENROLMENT FORM

COMPLETE AND RETURN TO COURSE COORDINATOR:

P.O. Box 480, Clare SA 5453 OR

email asku3a@gmail.com OR telephone 0447 601 142 (messages only)

Assume enrolment accepted on receipt of paperwork and payment unless you hear otherwise. *All information kept in accordance with U3A Lower North Inc. privacy policy*

List the group/s you wish to be enrolled in:

Name:	
Address (home and postal if differe	nt):
	Mobile:
Email:	
Year of birth:	Country of origin
Do you wish to receive newsle	etters by post [] or email []
Please tell us more about your	rself: Career/skills/interests, etc
	Friends, newspaper, cinema, leaflets
Why have you joined? To learn	n something specific / to keep mind active / to keep body active /
meet people and make friends	/ all of above
	volunteer organisation and members are expected to help in its e to abide by the constitution and bylaws of U3A Lower North Inc.
Signature:	Date:
	inted to \$25 if paid before enrolment deadline at end of previous year. New vill be entitled to membership for the following year without additional payment.
	ed free but if you want something more compact and attractive you can order elect [] pin back or [] magnetic (do not use magnetic with pacemaker)
Print name as you want it to appear of	on badge
PAYMENT by cheque [] cash [] E To pay online: U3A Lower North, No. For ID use surname followed by initia	748828019; BSB 085 558. Emails to u3alowernorth@gmail.com