

## ROYAL AUSTRALIAN AIR FORCE ASSOCIATION TASMANIA DIVISION INC

61 Davey Street, HOBART TAS 7000

## **APPLICATION FOR MEMBERSHIP**

Hobart / Launceston / North West Branch

TITLE:	SURNAME	
GIVEN NAMES:		
Private Address		
Date of Birth	Email:	
Phone Contact		
Membership Category Requested:		
(Ordinary, Associate) See page 2 fe	For definition of member categories.	
If membership due to RAAF Ser	rvice: Service/PM Keys No:	
Rank: Date Join	ned: Date Discharged:	
Units Served In:		
Service Category or Mustering:		
Post Nominals/ Campaign Awards	s:	
If application for membership is	due to other than RAAF Service:	
Reason for Joining:		
	information I have provided is true and correct and the to be bound by the provisions of the Constitution	
Signature of Applicant	Date	······································

PROPOSITION:		
Membership propose	d by:	
Signature:		
Membership Seconde	ed by:	
Signature:		
SUBSCRIPTION R	ATES	: :
Ordinary Member:	\$	per annum
Associate Member:	\$	per annum
Member Category I	Descrij	ption:
		ng had RAAF or Commonwealth Air Force Service or air related ADI and eligible to take office.
		AAF or related Air Force Service but in sympathy with the aims and sociation; No Voting rights and not eligible to take office
I enclose the sum of S	5	for (Ordinary, Associate) Membership.
Office Use: Date Re	ceived	: Date Accepted:
Proof of Service Acc	epted:	
Acknowledgement Se	ent:	

State Secretary: 0447 751 816 RAAF Association Office: : Tel (03) 6200 9221 Wed 10am to 3pm Email: secretary@raafatas.org..au