



Individual Member Application

To Public Officer,
Australian Camp Connect Association Inc
P.O Box 321
Kilsyth. Victoria. 3137. Phone [03] 9779 6909

Email: memberships@campconnect.org.au Web: www.campconnect.org.au
ABN: 38 646 315 725

Applicant

Title [Mr/Mrs/Dr...]: First Name:..... Surname:.....

Phone [H]:..... [W]:..... [Mobile]:.....

Email Address:.....

Residential Address:
.....
.....

Postal Address [if different from above]:
.....
.....

Membership Rates

Membership of ACCA **\$55.00**

Payment Details

Subscription \$

Donation \$

TOTAL \$

Payment Options

Payment of Membership Fees to "Australian Camp Connect Association Inc." must accompany this application.

ACCA Bank Details [for direct deposit of subscription fees]

Account Australian Camp Connect Association

Account Name: 633 - 000

BSB 120448519

Account No:

Cash Cheque Money order Direct Deposit

Membership Statement

To the Public Officer,

I wish to become a member of the Australian Camp Connect Association Inc. I understand that acceptance of my membership in accordance of the constitution of the Australian Camp Connect Association will allow me to vote or to nominate to become a committee member or any other elected position within the Australian Camp Connect Association Inc.

I accept and support the objectives, purposes and constitution of the Australian Camp Connect Association Inc.

Signature:

Date: