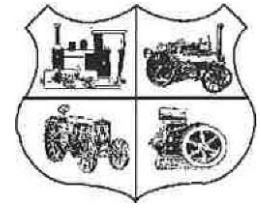




CAMPBELLTOWN STEAM AND MACHINERY MUSEUM



Operated by the:-
 NEW SOUTH WALES STEAM PRESERVATION CO-OP SOCIETY LIMITED
 All correspondence: PO BOX 905, CAMPBELLTOWN, NSW 2560
 or csmm.info@gmail.com

MEMBERSHIP APPLICATION FORM

PLEASE COMPLETE BOTH SIDES OF FORM

I Mr/Mrs/Miss/Ms/Dr
 (Delete as applicable) (Full name of applicant)

hereby apply for membership of the NSW Steam Preservation Co-op Society Limited.

If this application is approved. I hereby agree to abide by the rules, bylaws and regulations of the Society and to pay subscriptions, insurance premiums, storage fees, lease fees, and any other charges as determined by the Board when due. As an intending member I understand that copies of the rules, all special resolutions affecting membership and the latest Annual Report are available in the Registered Office (located at the Campbelltown Steam and Machinery Museum) and may be perused by any member or intending member.

SUBSCRIPTIONS <i>Choose one of the following</i>	COMMENTS Please contact us to discuss your application	\$ <i>Enter the amount</i>
Ordinary Member \$50.00	All members other than pensioners, juniors or group members.	
Pensioner member \$25.00	Pensioners must have permanently ceased full-time employment due to health reasons or having reached retirement age.	
Junior Member \$20	A student at primary or secondary school (under 16 years old) or a child under school age. Insurance is covered in this membership fee. No shares are allotted to a Junior Member.	
Shares	Upon joining, each member as set out above must have allotted, and subscribe to, three (3) fully paid shares at \$1.00 value per share.	3.00
Insurance \$50	All members, irrespective of the type of membership (except Junior membership), are liable to pay an annual insurance premium.	50.00
Group Membership \$120	Membership for an active group to use the site. Group members must have their own insurance coverage.	
	TOTAL AMOUNT TO BE PAID	\$

To pay for your membership: Direct Deposit at the Bendigo Bank
 BSB 633 000 Account Number 164873754
 Please use your Full Name as a deposit reference comment.

Signed:

Date:

PERSONAL DETAILS

Preferred first name (eg Bill instead of William)	Date of Birth		
Address			
Suburb	State	Post Code	
Telephone Home	Telephone Mobile		
Email address			
Would you like to receive society email updates for shows, events and working bees			Yes / No
Would you like to receive the society newsletter in colour and email form (If no, then you may be liable for additional printing and postage charges)			Yes / No
Primary skill (ie employment):		Secondary skill	

Qualifications

Please supply details of relevant certificates held (eg Boiler Attendant certificate, welding certificate)

	Certificate/License Type	Number
1		
2		
3		
4		

Main Interests

Please provide details of your main interest(s). Include an indication of the machine(s) that you own (if any)

OFFICIAL USE ONLY

Application approval meeting		Type of membership	
Number of shares allotted		Membership card number issued	
Amount received		Entered in database	