



P.O. BOX 49 ALEXANDRA VIC 3714
Enquiries to Secretary@murrindindieastu3a.org.au

Membership Form

First Name: _____ Surname: _____

Street Address: _____

Postal Address: _____

Postcode: _____

Phone (Home): _____ (Mobile): _____

Email: (Please write clearly) _____

Year of Birth: _____

Are you fully vaccinated against COVID-19?: Yes No

Emergency Contact: (in case of accident or illness)

Name: _____ Phone: _____

Which classes or activities would you like to attend? (Please list them all)

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Do you use Facebook? (Please circle) Never Sometimes Often

Membership Fees: \$40 (individual) \$60 (couple) \$20 (affiliated)

Photography Permission

I give my permission for photographs to be taken and used for U3A purposes. Yes No

I wish to renew/apply for membership of Murrindindi East District U3A and agree to the aims as set out in the U3A Murrindindi East constitution.

Signature:..... Date.....