

ABN 46 772 105 357

ENROLMENT FORM 2019

SURN	AME	Year of Birth	
OTHE	R NAMES		
POSTA	AL ADDRESS		
			•••••
RESIDENTIAL ADDRESS if different from above			
Telepl	hone No		•••••
E-mail	l		•••••
State courses/activities you wish to attend			
	rstand that the above details will be recorded in U3 unication purposes. My contact details will not be out.		
(Please	tick the box below if you do not wish your name/photog	raph to be publishe	d)
	I do not wish my name and/or photograph to be p photo shoots taken at any U3A activities.	oublished and I wi	ll step out of
Signed	d	Date	
Note:	annual membership fee for the calendar year 2		vear, \$15 for half

Note: annual membership fee for the calendar year 2019 is \$30 full year, \$15 for half a year and \$10 for Term 4 and is non-refundable. (An extra fee may be charged for some activities to cover additional expenses).

Please send completed form together with membership fee to:

The Treasurer
U3A Gawler Branch Inc
PO Box 1581
GAWLER SA 5118

or pay direct to bank and send form only BSB 105 009 (Bank SA) Account 0657 70140 Reference: Your Surname