



ROYAL AUSTRALIAN REGIMENT ASSOCIATION (ACT BRANCH)

APPLICATION FOR MEMBERSHIP

I,.....(Given Names)(Surname)
wish to apply for membership of the ACT Branch of the Royal Australian Regiment Association. I agree to abide
by the Association Constitution and any Rules and By-Laws of the Branch.

Date of Birth.....On first name terms, I prefer to be called.....

Details of my service with the Regiment are:

Service Number.....Rank.....

Units and Dates Served.....
.....

Honours, Awards or Post Nominals.....

Full Residential Address.....
.....Postcode.....

Full Postal Address (or 'As Above').....

Telephone: (Priv) :.....(Bus) :.....Fax :.....

Mobile:..... Email:.....

Present Occupation:

Enclosed is my subscription for one year's membership (includes 2 copies of 'Duty First' and 3 copies of Branch
Newsletter).

REMITTANCE:

Annual Subscription @ \$15.00 (Payable by Cash, Cheque or Money Order)

Date:Signature:.....

PAYMENT may be made by:

- bank transfer direct to the Association's Defence Force Credit Union account
 - A/c Name - RAR Association (ACT Branch)
 - BSB - 803 205
 - A/c No - 3842684
- cheque made payable to the RAR Association (ACT Branch)
- Mail to: The Secretary Peter McCann 91 Summerville Cres Florey ACT 2615

BRANCH USE ONLY

Date ReceivedChecked

Personal details entered in the membership database

Receipt Number