

In Confidence

RAEME Association NSW Inc.



**Application for Membership
Of the Association
As Per Rule 3**

*** * * Please Print All Details * * ***

I, _____ (Surname) _____ (Given Names)

Of _____ (Street No & Name)

At _____ (Town / City) _____ (State) _____ (Post Code)

Home Ph _____ Business Ph _____

Fax No _____ Mobile Ph _____

Email _____

Hereby apply to become an “Ordinary” / “Associate”* (Delete one) member of the RAEME Association NSW Inc. In the event of my admission as a member, I agree to be bound by The rules of the Association for the time being in force.

Signature _____

Date of Birth _____ / _____ / _____
(Optional)

Date _____

*** * * * ***

I, _____ (Full Name) **being a member of the Association,**

Nominate the applicant, who is personally known to me, for membership of the Association.

Signature _____

Date _____

I, _____ (Full Name) **being a member of the Association,**

Second the nomination of the applicant, who is personally known to me, for membership Of the Association.

Signature _____

Date _____

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RAEME Association NSW Inc. - Membership Application Continued

Serving Members (Circle that Applicable)

ARA / GRES Current Unit _____

Unit Address _____

Rank _____ **Trade / Appointment** _____

Retired Members

Last Unit Served _____

Location _____

Military Details

Current / Retiring Rank _____ **Service Type** _____
(ARA, ARES, GRES, CMF)

Period of Service _____ **to** _____

Enlistment Type _____
(RMC, OCS, DEO, ADFA, National Service, Adult Trade, Apprentice, Trainee)

Apprentice Intake: _____ **Adult Trade / Trainee Course:** _____

Army Corps: RAEME (Circle if RAEME) **Other** _____ (Insert if Other)

Associate Members*: Navy, Air Force, Public Service, Partner (Circle that Applicable)

Next of Kin (For Record Purposes Only - Optional)

Surname _____ **Given Names** _____

Relationship _____ **Address** _____
(If Different from Above Address)

* * * * *

Please Note: All information submitted is of a confidential nature, and will be for committee use only, and WILL NOT be used or identified to ANY other organizations, persons or parties what so ever.

<p><u>Secretary's Use Only</u></p> <p>Approved by Committee: _____</p> <p>Membership No: _____</p> <p>Remarks: _____</p> <p>_____</p>

<p><u>Please Note</u></p> <p>Membership will only be processed when payment of the fee is received. The completed application form, and subscription fee, may be handed to a committee member, or posted to the Secretary at: RAEME Association NSW Inc. PO Box 463 MOOREBANK NSW 1875</p> <p>Subscription Fee: See Rule 8</p>
