



# THE PORT OF YAMBA HISTORICAL SOCIETY

P O Box 100, Yamba NSW 2464 Phone: 6646 1399  
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## NEW MEMBERSHIP APPLICATION - 2017/18

NAME: Mr/Mrs/Ms .....  
(please print clearly)

ADDRESS: .....

POSTAL ADDRESS: .....  
(if different from above)

EMAIL: .....

PHONE: .....(H) .....(M)

**ANNUAL SUBSCRIPTION:**  \$10.00 Plus \$1.00 joining fee

Your membership subscription entitles you to free entry into the Yamba Museum, all Society events plus a monthly newsletter. It also assists the committee to continue to enhance and maintain the facilities for the enjoyment of visitors to the Museum. Should you wish to help with the ongoing work, your assistance is always most welcome. A membership year ends 30 June in each calendar year.

I hereby apply to become member of the Port of Yamba Historical Society. I agree to be bound by the rules of the Society currently in force.

Signature 1: ..... Date: .....

I, ..... a member of the Port of Yamba Historical Society, nominate the applicant, who is personally known to me, for membership of the Society.

Signature of the proposer: ..... Date: .....

I, ..... a member of the Port of Yamba Historical Society, second the nomination of the applicant, who is personally known to me, for membership of the Society.

Signature of the seconder: ..... Date: .....

**CONTACT NEWSLETTER: Please indicate your preference:-**

- I would like to receive the Contact by post for an additional \$11.00 postage fee.
- I would like to receive the Contact by email.
- I would like to collect the Contact from the Museum.
- I do not wish to receive the Contact.

**PAYMENT OPTIONS:**

- Payment may be made directly at the Museum during opening hours.
- By cheque made payable to: Port of Yamba Historical Society
- By Direct Deposit: Port of Yamba Historical Society - BSB 062688 Account No. 10153663  
(please enter your name in the Reference field)

<u>For Office Use Only</u>		
Receipt No:	Date:	Card Issued:
Members Register Entered:		Contact Survey: