

MEMBERSHIP APPLICATION / RENEWAL

& TAX INVOICE.

NSSA Membership. GPO Box 7048, Sydney NSW 2001. AUSTRALIA.

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(02) 4963 5037

Please complete the details below, print out this form and return with payment (or details) enclosed.

Alternatively, go to www.nssa.com.au/membership and join or renew online...!!!

Your Details: Family / School / Organisation applications, please include name of main contact.															
Title	e:		First N	lame:					Surnam	ne:					
Organisation:															
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Sub	urb:							State:			Postcode	9:			
Country (if not Australia):															
Phone: Home: Work:															
Mob	Mobile: E-mail:														
Previous Chapter (if any): Membership Number (if known):															
Chapter of Preference (if any, or automatic geographic placement will occur):															
Preferred met		method	E-ma	il	Phone	Home	W	/ork	Mobil	Э					
			Post		Other (s	specify)				,,					
l wo	ould li	ke to be	come a	membe	er / renev	v my me	embersl	hip as	indicated	belo	ow: (All ra	tes include	GST)		
	Student / Pensioner / Concession Type														
	(Copy of proof required)											\$ 25.00 pa (includes \$2.73 GST)			
	Regular										\$ 50.00 pa (includes \$4.55 GST)				
	Donation (Amount):										\$				
	THANK YOU.							!!				Total Amount Paid \$			
Payment Details (all payments must be in Australian currency): Please check your payment details carefully.															
Direct Deposit option no longer available.															
Ched	que	Mone	ey Order	-	Cash			C	redit Car	d (inclu	ude security co	ode)	VISA	IFROM)	
Cheque / Money Order / Credit Card Number															
Cardholder's Name: As shown on card security code															
Card Expiry Date Date Signed															
Cardholder's Signature: Card orders must be signed															
NSSA Office Use Only															
D.D.	BS	B 082	2 001	Account 519		519 980	980 551		nme Nat		tional Space Society o		of Australia Ltd	·	
Pay	ee Nam	е			BS	В		Acc	ount			Date Banked			
Cheque / Money Order Number Receipt Amount \$												•			
Proce	essed	Name			Sign	ned			Date			Amount	\$		