

# ATTITUDINAL HEALING

W e s t e r n A u s t r a l i a

## MEMBERSHIP APPLICATION FORM

I wish to apply for financial membership of Attitudinal Healing Western Australia (AHWA) for the period 1<sup>st</sup> July, 2014 to 30<sup>th</sup> June 2015. My personal details are as follows:

Title : \_\_\_\_\_ Full Name : \_\_\_\_\_

Postal Address \_\_\_\_\_ Post Code \_\_\_\_\_

E-mail Address : \_\_\_\_\_ Preferred Phone \_\_\_\_\_

### Membership category

Members: \$30.00       Students & Concessions: \$10.00

Membership subscriptions are payable annually.

### Payment Details

Cheque/ Money Order enclosed/ Cash (*please circle*) OR

Direct Debit made to Account Name: *Attitudinal Healing WA*

ANZ Bank, BSB No: *016 412*, Account No: *9044 23081*, Reference: *Member's name*

### Applicant's Declaration

I confirm above details are correct and that I will comply with the Constitution and rules of the Association.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### (Office use only)

Payment processed and accepted by: \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

Membership confirmed by Board on: \_\_\_\_\_ Date \_\_\_\_\_ Authorised signatory \_\_\_\_\_

