

The Adelaide Country Music Club Inc.

www.acmc.org.au

Email: info@acmc.org.au

PO Box 307 Modbury North SA 5092

Phone: (08) 8283 1565

Membership Application

Surname: _____ First Name: _____ Month of Birth: _____

Surname: _____ First Name: _____ Month of Birth: _____

Address: _____

Suburb: _____ State: _____ P/Code: _____

Phone: _____ Email: _____

Mobile: _____

Annual membership fees are due on 1st March each year.

Membership Type (tick one)	Annual Fee	Concession Card	Sighted By
Ordinary ()	\$14.00		
Concession ()	\$10.00	_____	_____
Corporate ()	\$100.00		

I undertake to abide by the Constitution and Rules and any direction arising from any incident on the club premises in which I may be concerned.

Signed: _____ Date: _____

Office Use Only

Receipt No: _____ Date: _____ Member No: _____

Card: _____ Database: _____ M/ship Book: _____ Barrel: _____