



THE SOUTH AUSTRALIAN GERMAN ASSOCIATION INC.

223 Flinders Street, Adelaide SA 5000
PH: 8223 2539 E-Mail: office@thegermanclub.com.au

APPLICATION FOR MEMBERSHIP

I hereby apply for membership of The South Australian German Association Inc.

I declare that all information given is true and correct.

I undertake to comply with the Constitution of the Association.

	Applicant	Spouse/Partner	First Child	Second Child
Surname				
First Name				
Date of Birth				
Address				
Contact Number				
E-Mail				
Occupation				
German Speaking <i>yes or no</i>				
Australian Pension Card CRN <i>card must be shown</i>				
Student Card				

Applicant's Signature _____

Office use only

Membership Category

Membership Fee \$ _____

Date Paid _____

Paid by

please circle

Cash - Credit Card - Eftpos - Cheque