

Application Form ASSOCIATE MEMBERS

(One form per Applicant)

I hereby wish to apply as an **Associate Member** with Casa de Macau Incorporated.

SURNAME:	MR MRS MISS MS (please circle)		
FIRST NAME	MIDDLE NAME:			
ADDRESS:				
SUBURB	Post Code			
Date of Birth:	Phone No:			
Mobile No: Email Add	dress:			
Fee Schedule:	Annual Dues	Joining Fee	Total Payable	7
Associate Members	\$ 50.00 p.a.	\$ 50.00	\$ 100.00	
Condition of Membership: (applicable to new A	ssociate Members f	rom 1 June 2019)	
 required to pay the full cost of these eve New Associate Members do not qualify Your application is subject to acceptance course. 	for subsidies which	-		
Signature:		Date:		
PROPOSER (Must be a Voting Member) I, (Print Name)				of
(Address)Casa de Macau Inc., propose and support this application			being a Voting me	mber of
Signature:	Da	te:		
FOR OFFICIAL USE ONLY				
Date Received:Amount:	Cheque/Ca	shReceipt No:		
Approved / Not Approved Date:	as per Co	mmittee Meeting		

Please make cheques payable to "CASA DE MACAU INC." For Electronic Fund Transfer details see reverse (page 2)



Direct Deposit Information

How to pay via direct deposit:

Step 1: Complete Membership Application Form

Step 2: Calculate amount payable (and note this on the form)

Step 3: Transfer this amount to Casa de Macau Inc. bank account - Details below:

Account Name: Casa de Macau Inc.

Bank: Westpac Banking Corporation

BSB 032-090

Account Number: 13 4-630

Step 4: Use description such as surname in the transfer comments so we can

allocate the membership fees correctly.

Step 5: Email the Secretary, with amount deposited, the description used in the transfer

comments (or the branch name) and payment date.

Step 6: Return completed form to the Secretary, Casa de Macau Inc. at:

P.O. Box 940, Ryde NSW 1680 or

Email: Secretary@casademacau.org.au

** Please ensure you advise the Secretary of your direct deposit information **