

MARITIME SQUADRONS ASSOCIATION

C/ Geoff Hyde
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STRATHFIELDSAYE
VIC 3551

OR

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Membership Application Form

Full Name:

Address:

Suburb/City:

State:

Postcode:

Membership Type: Annual / Affiliate (\$10) / Life (\$100)

MSA Tie and Lapel Badge \$28.00

Home 'Phone:

Work 'Phone:

Facsimile:

Mobile 'Phone:

E-mail:

(Please indicate whether you are agreeable to share this address with other MSA members)

Squadrons Served In (with years):

Mustering/Category:

Spouse/Partner

I enclose a cheque / Direct deposit for \$ _____ for membership of the Maritime Squadrons Association

and \$..... For a Tie and Badge.

Direct Deposit Details:

National Australia Bank
Maritime Squadrons Association
BSB 084-255 Account 205114992

Signed

Office Use Only

Accepted _____ Date ____ / ____ / ____ Entered in Register of members

Member Number _____