



## 2021 Membership Renewal Form

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Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Address \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email contact: \_\_\_\_\_

First Aid Qualification  
and Expiry date \_\_\_\_\_

***If family membership type, please list names and dates of birth of all covered under this membership on page 2 of this form.***

List any medical problems that we should know about and medication required:

Contact details (next of kin and/or someone not on a caving trip with you) in case of emergency or accident

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Mobile: \_\_\_\_\_

Working with Children Check no and expiry date: \_\_\_\_\_

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### **Membership Category** – What membership category are you renewing?

Fees for 2021 fees are determined at the April AGM.

- Family (\$150/Year)       Single (\$90/Year)       Pensioner (\$70/Year)
- Retired Family (\$125/Year)       Student(\$70/Year)       Retired (\$70/Year)
- Single Parent Family (\$112)       Active/Non-Active Life Member
- Member of another ASF club (\$22)

Amount Paid \$ ..... Date Paid: .... / .... / ..... Member's Signature .....

Please make cheques payable to *Illawarra Speleological Society Inc.*

or **Contact the Treasurer if you need Electronic Funds Transfer account information.**

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## Family Membership details

	Person 1	Person 2	Person 3	Person 4	Person 5
Name					
Date of Birth					
Email (if different from parent/s)					
Mobile (if different from parent/s)					
First Aid Qualification And expiry date					
Working With Children Check Information					
Medical conditions and medication					