

STANTHORPE POTTERY CLUB INC.

MEMBERSHIP APPLICATION FORM

Name

Date of Birth.....

Residential Address.....

.....

Postal Address (if different).....

.....

Phone Number..... Mobile No.....

Email address.....

I.....wish to apply for membership to the Stanthorpe Pottery Club Inc. I agree to follow the rules of the club as set out in the constitution.

Signature.....Date.....

Proposed by: Name..... Seconded by: Name.....

Signature..... Signature.....

Proposed at Stanthorpe Pottery Club meeting dated.....

Accepted.....Rejected.....

Membership Fee: \$35 P.A. (July - June).....

\$17.50 Half Year Fee: (Jan-June).....

Key Deposit \$5.....

Annual Den Fee (Optional) \$30 Yes.....No.....