

Allocated Membership #: _____ (Club use only)



Mundaring Football Club Inc.

Membership Application Form

Personal Details (Please complete all details)

Full Name: _____

Postal Address: _____ Suburb: _____

Postcode: _____ Email Address: _____

Contact Number: _____

Categories: (Please Tick One)

- Playing member (\$250.00) Playing member (Student) (\$230.00)
- Sponsor Representative (\$0.00) Social member (\$20.00)

Signature: _____ Date: _____

Please return completed form and your payment to a committee member or to our Canteen Manager on match day. Alternatively:

Email: membership@mundaringfc.com.au; or Post: Mundaring Football Club Inc, PO Box 167 MUNDARING WA 6073; or

Payment Options (Please Tick One)

- Cash (Mundaring FC representative collecting cash: _____)
- Cheque: Please make all cheques out to "Mundaring Football Club Inc" and mail to PO Box 167, Mundaring WA 6073.
- EFT: Please deposit to BSB: 633-000, Acc: 121 771 232. Please use your last name as the narration.
- Credit Card: Please phone our valued sponsor, Mundaring Community Bank® Branch Bendigo Bank on 08 9295 6411 between 9am-4pm Tuesday-Thursday and 9am-2pm Friday, who will promptly process your payment.

Please tick this box if you require a tax invoice.