



Membership Application Form

3 RAR SA Association Inc, PO Box 458 Glenside SA 5065



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Surname	First Name	Initials
Preferred Name/Nickname		DOB / /
Postal Address		
Suburb/Town	State	P/C
Mobile	Phone	Fax.
Email Address:		

3 RAR Battalion History

Years (Dates) Served with 3 RAR:
Company/Companies Served in:
Current or Discharged Rank:

MEMBERSHIP

All membership: \$10.00 for 1 year, \$20.00 for 2 years or \$50.00 for 5 years
Includes a minimum: 3 X "In Touch" magazines annually

FULL MEMBERSHIP	Service No (Required)	Paid \$
ASSOCIATE MEMBERSHIP	Family/Friend name:	Paid \$

MEMBERSHIP DISCLOSURE, PRIVACY AND SECURITY

The association will ensure your contact information remains private and secure at all times and will not be disclosed to any third party without your full Knowledge / approval.

SIGNATURE

Signature..... Date...../...../..20.....

HQ Membership Officer

Until a Membership Officer is elected.
3 RAR SA Association Inc, PO Box 458, Glenside SA 5065

Bank Detail for Electronic Funds Transfer

Defence Bank BSB 833 205 Account Title: 3 RAR SA Association Inc - a/c 20305393
Please Clearly identify your transfer with your name and transaction details