BLUE MOUNTAINS FAMILY HISTORY SOCIETY Inc

PO Box 97
SPRINGWOOD. 2777

https://www.bmfhs.com

Membership Application/Renewal 2027

Name: **1.**…… **2.** ……...……...

Address: ……..…….

Postal Address:..... **Postcode:** ……

Email Address: …… *(please print)* **Phone:** ……

hereby apply to become a member/s of the above-named incorporated association. In the event of admission as a member/s we agree to be bound by the Constitution and By-Laws of the Society for the time being in force.

Signatures: **1.** …….. **2..**……

Date: …… NOTE: ***Membership & associated benefits lapse if renewal is not made by March 31st.***

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MEMBERSHIP FEES

Full membership from 1st January to 31st December

Single	50.00	……
Joint (two persons at the same address)	60.00	……
Societies, Groups, Libraries, Associations	60.00	……
Postage for *Explorers' Tree* Journal	15.00	……

Partial membership fees for NEW members ONLY

After 1st July		
Single	25.00	……
Joint	30.00	……
Postage	7.50	……

TOTAL: **$ _____**

Payment methods; -
Cash (at a meeting) or Cheques payable to BMFHS Inc or

EFT (Direct Debit)
Account Name: Blue Mountains Family History Society Inc. (BMFHS)
BSB: 062 601: **Account No**: 2801 7689
EFT Reference: your surname. (this must be included)

Signed application form to be received by the BMFHS before your membership card is issued.

OFFICE USE: **SUBSCRIPTION YEAR - 2027**

Receipt No: ……Date: …… Membership No: …… .

Amount: $..... : Cash ☐ : Cheque ☐ : Bank Deposit Date: …… .

Magazine Postage: …….. Membership Card Issued ☐ : New Member's Kit ☐