Shoalhaven Defence Families Association 2019 MEMBERSHIP FORM - \$30

Relationship to defence (please circle)	Navy – Army - A	Air Force - Civilian
FIRST NAME	SURNAME _	
DOB		
ADDRESS		
PHONE Home		
EMAIL		 -
Preferred Method of contact (please circle		Email/Facebook
Would you like the Time Out Magazine emailed to you		Y/N
Are you a new member or renewing yo	our membership	New / Renewing from 2018
EMERGENCY CONTACT DETAILS	·	· ·
NAME		
PHONE		
RELATIONSHIP TO YOU		
Children's Details		
Name		DOB
Name		DOB
Name		DOB DOB
I	OFA permission to us or frames and/or at Retreat or associated nts, marketing, leaflets	e any still and/or moving image udio footage depicting my/our devents, on behalf of the SDFA, s, or any other use such as for
SIGNATURE	DATE	
*I have read and will abide by the SDFA Cons		
EFT payments - NAME: SDFA BSB: 01		
NON-DEFENCE MEMBER		
Nominated by:	Seconded by:	
Name	_ Name/Positi	on
Signature	_ Signature	
OFFI	CE USE ONLY 	
Actions	OR	
EFT/Cash (receipt no)	QB Email contacts	
acebook – Profile	Group	 Page