

## WYONG FAMILY HISTORY GROUP Inc.

The Secretary P.O. Box 247 WYONG NSW 2259. Telephone 4351 2211

## APPLICATION FOR MEMBERSHIP RENEWAL 1. 1. 2024 - 30. 6. 2024



## PLEASE PRINT VERY CLEARLY

FULL NAME / S Dr. Mr. Mrs. Ms	. Miss.			
HOME ADDRESS				
			POST CODE	
POSTAL ADDRESS (if different)				
<b>☎</b> CONTACT NUMBER/S				
EMAIL ADDRESS (lower case & ve	ry clearly - please)			
PAST / PRESENT OCCUPATION/S				
IN CASE OF AN EMERGENCY PL	EASE CONTACT _		<b>≅</b> NO	
SIGNATURE/S of APPLICANT/S				
RENEWING DATE		МЕМВЕР	RSHIP NUMBER/S	
For our Personal Acciden	·			bracket/s.
10 - 50	0. 51 - 70.	71 - 85.	86 and over.	
<u>FEES</u> REJOINING FROM 1 Jan 2024 - 30 June 2024	SINGL MEMBER 20.00		FAMILY MEMBERSHIP 30.00	f
1 Juli 2024 30 Julie 2024	20.00		20.00	
For Direct Deposit payments the GA/c Name: WYONG FAMILY HISTORY Please include the word <i>Member</i> then post this completed form to the second s	ORY GROUP INCORPO SHIP + YOUR NAME	ORATED BS in the details	B: 633 000. Account I section so we can iden	No: 145003679.
Please make all cheques /	money orders payab	le to - WYON	G FAMILY HISTORY G	ROUP INC.
Received by	Date	Cash.	Direct Deposit.	C.C. Online
EFTPOS Cheque / Money Orde	er Number	WFHG Receipt Number		