

Membership Application

For an Individual Member

After payment, this is a **Tax Invoice**

First & Last Name:		Your Org		Your Sex	M F	Record Only
Your Street Address:				State	Postcode	
Phone Numbers:	Please show Area Code	Mobile	+61	Home	+61	Business +61
Email Address 1:				Team Rainbow mail will usually be sent		
Email Address 2:				If you prefer postal mail, put an X in the box		
Your Homepage:	http://					

For a Club, Team or Organisation

Formal Name of Org:	Eg Team Rainbow Inc		ABN If applic	
Short Name of Org:		No. of Members	Male	Female
Org's Post Address:			State:	Postcode
Org's Email Address:				
Org's Website URL:	http://			

Office Bearers:	President	Secretary	Treasurer	Other	Alternate Rep
Main Contact = X					
First Name:					
Last Name:					
Email Address:					
Mobile Phone:	+61 4	+61 4	+61 4	+61 4	+61 4
Home Phone:	+61 7	+61 7	+61 7	+61 7	+61 7
Business Phone:	+61 7	+61 7	+61 7	+61 7	+61 7

Membership Type

Payment

Note

Club, Team, Org: \$80 or \$40	Enter \$ amount =>	A\$	Primary	EFT to: Team Rainbow BSB 084 952 NAB Account 928608048	EFT - quote your name/org name in Reference box
or Individual Membership - \$10			Alternate	Chq/MO to Team Rainbow, PO Box 112, Rainbow Beach, QLD, 4581	If by chq/MO, quote your name/org name on back of payment

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Declaration

By my signature below I/my org confirms that I/we have read and commit to the Team Rainbow Constitution and that my/our participation in Team Rainbow activities is voluntary with no liability accruing to Team Rainbow, its officers or members. I will advise Team Rainbow of any change in my/our contact details and I/we acknowledge that Team Rainbow has discharged its obligations for sending them to the address indicated above.

Signature**Date**

Privacy: Team Rainbow secures its database and does not give personal information to other people or organisations.