

For an Individual Member

After payment, this is a **Tax Inv/Rec**

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 electronically				
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	Other	Total			
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: \$40 or \$20 or Individual Membership - \$5	Enter \$ amount =>	A\$	Primary	Pay to: Team Rainbow BSB 084 952 NAB Account 928608	EFT - quote your name/org name in Reference box
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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

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