

## **Membership Application**

Person 1: First Name	Last Name
Preferred name for your badge	
Person 2: First Name	Last Name
Preferred name for your badge	
Address:	
Postcode:	
Phone: Mob:	
In applying for membership of the Wine Guild of	SA I acknowledge that:
<ol> <li>I agree to abide by its objects and rules a</li> </ol>	as stated in the Constitution
2. As per The Guild's Privacy Statement, I	understand that:
<ul> <li>a. Photographs of me may be taken</li> <li>Newsletter and on the Guild's we</li> </ul>	at Guild functions and may appear in the Guild's bsite
<ul> <li>b. My personal details contained he but will not be disclosed to third p</li> </ul>	rein may be used by the Guild for official purposes, parties without my consent
Note: Copies of these documents are available on out the Secretary.	ur website, www.wineguildsa.com/membership.php, or from
Date	
Signed (Applicant 1) S	Signed(Applicant 2)
Proposer (name) Sec	conder (name)
Signed (Proposer)	ned (Seconder)
JOINING FEE AND ANNUAL SUBSCRIPTION COMMITTEE ARE:	DUE ON APPROVAL OF MEMBERSHIP BY THE
□ Joining Fee/person \$10.00	□ Subscription/person \$30.00
(Note: These are full-year rates. Pro-rata subs may a has been approved).	apply. Fees required will be advised after your application
application will be considered by the committee	d function before applying for membership. Your as soon as possible after receipt.  A. Inc., 22 Shearwater PI., Wynn Vale 5127
Office use only	
Date receivedOfficer's signature	Date approved