



U3A Rockhampton and District Inc.
ABN 83 907 668 103
MEMBERSHIP RENEWAL FORM

Title (Mr, Mrs, Ms, Other) Surname.....
First names: Preferred name:
Residential address: City..... Post code.....
Postal address: City..... Post code.....
Phone.....Mobile:
Email: (print clearly in CAPITAL letters)
Former occupation:
Qualifications / Skills / Hobbies / Interests:
Age Group: 50-59 [] 60-69 [] 70-79 [] 80-89 [] 90-99 (no fee payable) []
Membership fees are \$20 per person. Payment by 31st December would be appreciated.
Cash/ Cheque payment enclosed [] EFT payment made to U3A CBA account []
Account Name: U3A Rockhampton and District Inc BSB: 064710 Account Number: 0092 5452
Include your name in the description so your EFT payment can be identified by the Treasurer.

Signed..... Date:

Total Amount paid \$..... Receipt number: Date received:/...../.....

Return to: The Secretary, U3A Rockhampton and District Inc., P.O. Box 8160, ALLENSTOWN, Qld 4700.
Email: admin@u3arocky.au Web: www.u3arockhampton.org.au



U3A Rockhampton and District Inc.
ABN 83 907 668 103
MEMBERSHIP RENEWAL FORM

Title (Mr, Mrs, Ms, Other) Surname.....
First names: Preferred name:
Residential address: City..... Post code.....
Postal address: City..... Post code.....
Phone.....Mobile:
Email: (print clearly in CAPITAL letters)
Former occupation:
Qualifications / Skills / Hobbies / Interests:
Age Group: 50-59 [] 60-69 [] 70-79 [] 80-89 [] 90-99 (no fee payable) []
Membership fees are \$20 per person. Payment by 31st December would be appreciated.
Cash/ Cheque payment enclosed [] EFT payment made to U3A CBA account []
Account Name: U3A Rockhampton and District Inc BSB: 064710 Account Number: 0092 5452
Include your name in the description so your EFT payment can be identified by the Treasurer.

Signed..... Date:

Total Amount paid \$..... Receipt number: Date received:/...../.....

Return to: The Secretary, U3A Rockhampton and District Inc., P.O. Box 8160, ALLENSTOWN, Qld 4700.
Email: admin@u3arocky.au Web: www.u3arockhampton.org.au