

Membership Application Form

Renewal New Member

Name _____

Address _____

Email _____

Phone _____

Date of birth _____

Occupation _____

Please indicate what area you would like to get involved in. You may have already been involved for years but see something new to the list you haven't considered before!

Operations

<input type="checkbox"/>	Driver	<input type="checkbox"/>	Second person / Fireman
<input type="checkbox"/>	Guard	<input type="checkbox"/>	Carriage Attendant

Relevant qualifications / safeworking required _____

Maintenance / Restoration

<input type="checkbox"/>	Steam	<input type="checkbox"/>	Diesel
<input type="checkbox"/>	Carriage	<input type="checkbox"/>	Depot / Building
<input type="checkbox"/>	Machinery	<input type="checkbox"/>	Track (Depot)

Other

<input type="checkbox"/>	Depot Gardens	<input type="checkbox"/>	Admin / Clerk
<input type="checkbox"/>	Archives	<input type="checkbox"/>	Museum Tours
<input type="checkbox"/>	Marketing	<input type="checkbox"/>	Tour promotion
<input type="checkbox"/>	Social Media	<input type="checkbox"/>	Newsletter
<input type="checkbox"/>	Website	<input type="checkbox"/>	RSA
<input type="checkbox"/>	Catering / Buffet	<input type="checkbox"/>	Other:

I'm happy just being a member thanks...

FINANCIALS

Description	Price subtotal
1 year Ordinary Membership	\$44
1 year Senior / Aged Pension Membership	\$22
1 year Junior (under 18 years) Membership	\$22

Donate

PLUS optional donation

Donations greater than \$2 are tax-deductible

Amount: _____

<input type="checkbox"/>	3237 ongoing maintenance	_____
<input type="checkbox"/>	5367 Restoration	_____
<input type="checkbox"/>	3026 Restoration	_____
<input type="checkbox"/>	Carriage maintenance and restoration	_____
<input type="checkbox"/>	Depot Maintenance	_____
<input type="checkbox"/>	General donation	_____

TOTAL: _____

Payment Method

<input type="checkbox"/>	Credit Card	<input type="checkbox"/>	Cheque
<input type="checkbox"/>	Invoice me	<input type="checkbox"/>	Cash at office
<input type="checkbox"/>	Online store		

Credit Card number _____

Expiry _____

CCV _____

Signature _____

The Co-operative Act requires the LVR to make known that all members may view at the registered office a copy of the rules together with all special resolutions applicable under the Act and a copy of the last annual report of the society.

The submission of the application does not constitute an automatic right of approval of membership and the Lachlan Valley Railway Society Cooperative Limited reserves the right to refuse membership to any person and need not assign any reason for such refusal as allowed under the Co-operative Act.

Cowra NSW
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 Fax: (02) 6341 3599

P.O. Box 279 Cowra 2794

Lachlan Valley Railway Society Limited
 ABN 33 678 338 351

