



## U3A APOLLO BAY APPLICATION FOR MEMBERSHIP 2023

(Annual fee \$20)

Please complete this form and email to [u3aapollobay@gmail.com](mailto:u3aapollobay@gmail.com) or post it to  
U3A Apollo Bay Membership Secretary, PO Box 110, Apollo Bay VIC 3233

In accordance with current privacy legislation, information about individuals will be kept confidential and will not be supplied to any other organisation or person without your written consent.  
We ask for demographic data in order to comply with the Victorian U3A Network for funding purposes.

<p><b>Contact Details</b></p> <p><i>Please print clearly especially phone and email details</i></p> <p><b>(We communicate with members by email and The Apollo Bay News)</b></p>	<p>Last Name: ..... Title: .....</p> <p>Given Name: ..... Preferred Name: ...</p> <p>Street Address: .....</p> <p>Town: ..... Postcode: .....</p> <p>Phone: ..... Mobile: .....</p> <p>Email: .....</p> <p>Date of Birth ___ / ___ / _____ Prefer not to say: <input type="checkbox"/></p> <p>Male: <input type="checkbox"/> Female: <input type="checkbox"/> Other: <input type="checkbox"/> Prefer not to say: <input type="checkbox"/></p>	
<p><b>Do you have any disability?</b></p>	<p>Yes: <input type="checkbox"/> No: <input type="checkbox"/></p>	
<p><b>Are you of Aboriginal or Torres Strait Islander origin?</b></p>	<p>Aboriginal: Yes: <input type="checkbox"/> No: <input type="checkbox"/> Torres Strait Islander: Yes: <input type="checkbox"/> No: <input type="checkbox"/></p>	
<p><b>Are you twice vaccinated against COVID-19</b></p>	<p>Yes: <input type="checkbox"/> No: <input type="checkbox"/></p>	
<p><b>Emergency Contact</b></p>	<p>Name: ..... Relationship to you: .....</p> <p>Phone: ..... Mobile: .....</p>	
<p>Annual Membership Fee is \$20.00, due by end of April each year</p> <p><b>Payment Options:</b> <i>electronic or cash deposit (at any Bendigo Bank).</i></p>	<p>Payment Method:</p>	<p><input type="checkbox"/> Direct Debit <input type="checkbox"/> Bank Transfer <input type="checkbox"/> Cash Deposit</p>
	<p>Account Name:</p>	<p>U3A Apollo Bay</p>
	<p>Account Number:</p>	<p>150859536</p>
	<p>BSB:</p>	<p>633-000 (Bendigo Bank, Apollo Bay)</p>
	<p>So we know you paid</p>	<p><b>Please put your full name and date on deposit</b></p>
<p><b>Photography Permission</b></p>	<p>I give my permission for photographs to be taken and used for U3A purposes: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p><b>Signature required</b></p>	<p>Signature: .....</p> <p>Date: ...../...../.....</p> <p><i>Insurance Disclaimer: U3A insurance policy does not cover general members of U3A. In the event of an accident, general members must use their own medical insurance. If someone else (e.g. a U3A representative or owner of the premises) islegally liable for the injury, public liability insurance may be activated.</i></p>	