

## Affiliated Member Registration Initial

Financial Year\_\_\_\_\_ Date \_\_\_\_\_

(Form AWA 01)

Na	me of Club			
Type (S,P,J)	NEW CLUB MEMBER DETAILS			AWA Fee
	Full Name	Postal Address	Date of Birth	
	Email Address	Phone details HM MOB		
	Full Name	Postal Address	Date of Birth	
	Email Address	Phone details HM MOB		
	Full Name	Postal Address	Date of Birth	
	Email Address	Phone details HM MOB		
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	Full Name	Postal Address	Date of Birth	
	Email Address	Phone details HM MOB		
	Full Name	Postal Address	Date of Birth	
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	Email Address	Phone details HM MOB	1	
	Full Name	Postal Address	Date of Birth	
	Email Address	Phone details		
		HM MOB		
		TOTAL FEE		
CLUB BANKING REFERENCE				

## Notes

- Only bank transfers are accepted Aeromodellers WA BSB: 086-366 ACC: 04-862-5720.
- Form needs to be printed and filled out.
  - o Return to AWA treasurer by email or Post.
  - o AWA c/o P.O. Box 537 Bassendean W.A. 6934.
  - o Club banking reference must appear on the bank transfer details for tracking.