



Affiliated Member Registration Initial

(Form AWA 01)

Financial Year _____ Date _____

Name of Club _____

Type (S,P,J)	NEW CLUB MEMBER DETAILS			AWA Fee
	Full Name	Postal Address	Date of Birth	
	Email Address	HM	Phone details MOB	
	Full Name	Postal Address	Date of Birth	
	Email Address	HM	Phone details MOB	
	Full Name	Postal Address	Date of Birth	
	Email Address	HM	Phone details MOB	
	Full Name	Postal Address	Date of Birth	
	Email Address	HM	Phone details MOB	
	Full Name	Postal Address	Date of Birth	
	Email Address	HM	Phone details MOB	
	Full Name	Postal Address	Date of Birth	
	Email Address	HM	Phone details MOB	
	Full Name	Postal Address	Date of Birth	
	Email Address	HM	Phone details 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.
 - Return to AWA treasurer by email or Post.
 - AWA c/o **46A Joiner Street, Melville, WA, 6156.**
 - Club banking reference must appear on the bank transfer details for tracking.