

Please return this form to:

APPLICATION FOR MEMBERSHIP April 1, 2006 - March 31, 2007

Please insert your details in both sections of the form and return it with your payment to your club:

NAME: _____
 ADDRESS: _____

 _____ Post Code: _____
 DATE OF BIRTH: _____
 TELEPHONE NO. (h): _____
 (b): _____
 (m): _____
 Email: _____

Privacy policy:

All personal information on this form is collected in accordance with the National Privacy Principles contained in the Privacy Act 1988.

This information will not be disclosed to any unauthorised third parties without your consent.

Are you currently a member of another Speed Skating Club? YES NO

2006-2007 FEES

membership type required: SKATER \$.00
 AWD SKATER \$.00
 NON-SKATER \$.00

Please make cheques payable to

Upon being accepted as a member of, I hereby undertake to comply with all rules and regulations set down by the Club.

Signature/Parent (if applicant is under 18 years): on / /

Club use only:

Approved Rejected

By: on / /

The Club reserves the right to reject any application.

✂ ---Club Representative: detach and forward the bottom portion of this form + payment to the address below ---

To: Ice Speed Skating Association of NSW Inc. From:

The following details are to register your membership of the ISSA of NSW:

Title: _____ Name: _____ Date of Birth: _____
 Address: _____ Tel. H B: _____
 _____ Mobile: _____
 Post Code: _____ Email: _____

✓ Membership Type: SKATING MEMBER? AWD SKATER? OFFICIAL?

I agree to abide by the Constitution of the ISSA (NSW) Inc.

The information on this form will not be disclosed to any unauthorised third parties without your consent.

Approved Rejected

By: on / /
on behalf of the Association.

.....
Signature/Parent (if under 18 years)

on
Date

Send this portion of the application + payment to: The Treasurer, ISSA of NSW, PO Box 910, Leichhardt 2040
Contact Treasurer for bank details if you wish to pay directly. Then send ISSA portion of form to the Treasurer.