



MEMBERSHIP APPLICATION / RENEWAL FORM 2025

TITLE (Dr, Mr, Mrs, Ms, Other) _____

FIRST NAME(S) _____

SURNAME(S) _____

PREFERRED NAME FOR MEMBERSHIP BADGE _____

ADDRESS _____

_____ Postcode _____

TELEPHONE Landline _____

Mobile _____

EMAIL _____

PAYMENTS	Amount Paid
2025 Subscription Fees - Single \$165 - Couple \$285 (please provide both names above)	\$
Young Arts Contribution Optional donation to support the annual Young Arts development programme \$10, \$20, \$50, Other	\$
Total	\$

PAYMENT OPTIONS (please tick payment method used)	
Direct Debit	Bank: Suncorp Bank BSB: 484 799 Account: 004003055 Reference: Please state your name so that we can identify the payment *Date transmitted: / / *Please complete Please email the Membership Secretary at membershipnoosaadfas@gmail.com advising date of transfer, your name and all the relevant details requested above.
Cash	

VOLUNTEERING

We need a reliable team to assist our catering co-ordinator with the catering and bar service for each lecture. If you are able to assist please indicate below and our roster co-ordinator, Erika Hackett, will contact you to confirm the roster date/s that will suit you.

- Helping with food preparation and service
- Dates (or months) I am not available _____
- I am available to be placed on the 'emergency helper' list

<p>Public Liability Insurance: A \$20m policy is held by the Association of ADFAS which in turn covers all member societies including Noosa against potential claims under this type of insurance</p> <p>Compliance with the Privacy Act: I consent to have my name and contact details added to the ADFAS database and for them to be used to provide information to me on ADFAS lectures, travel and news. Members may unsubscribe from such messages at any time.</p>
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Please return this membership form by 31 January 2025 to:
The Membership Secretary, Australian Decorative & Fine Arts Society Noosa Inc,
 P O Box 481, Noosa Heads, Qld 4567

or by email to: membershipnoosaadfas@gmail.com