**APPLICATION FOR MEMBERSHIP**

I, ...........................................................................................................................................................................................

(Full Name)

of...........................................................................................................................................................................................

(No and Street Names)

.................................................................................................................................................. P/C ...................................

(Suburb & State))

Apply to become an; Ordinary Member  Associate Member  Social Member  *(Tick One Only)*

of the Submarines Association Australia.

On acceptance as a member, I agree to be bound by the rules of the Association.

I accept that information contained in this application will be provided to any Branch of the Association.

Signature: ................................................................................................................ Date: ................................................

*NOTE: On acceptance of membership members will be classified a ‘Member of the Branch’ in the State of residence. Members residing in a State with more than one Branch shall be classified as a member of the Branch nearest their residential address. Members may nominate their preferred Branch for Membership. Members may nominate as an ‘Unattached’ member, see Clause 4.1.1 of the SAA Constitution for details.*

Nominated Branch - ACT , NSW , , QLD , SA , TAS , VIC , WA , ‘Unattached’ 

This application must be accompanied with evidence of submarine service or information relative to the category of membership for which this application applies.

Preferred Name: (*or Nickname in the Service)................................................................* D.O.B*................................................*

Email Address: ........................................................................................................... .......................................................

Phone: *(Home) ................................................ (Work) ................................................. (Mobile) .........................................................................................*

Partners Name: (*Optional*)..............................................................................................................................................................................................

Which Service *(RAN, RANVR, RN, USN etc)................................................................* Service Number............................................

Date Joined Service: ...............................Discharge date ................................ Rank/Rating......................................... S/Q Category ...................................................................

Honours/Awards/decorations (include MinD if applicable): ...................................................................................

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Submarines Served on: Dates (*Approximately*)

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Service Highlights/History (use separate sheet if insufficient space)

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I consent to the following information being posted on the SAA website

|  |  |  |
| --- | --- | --- |
| Name: ........................................................................................... | YES | NO  |
| Address: ....................................................................................... | YES | NO  |
| Email:............................................................................................ | YES | NO  |
| Phone No’s: ................................................................................. | YES | NO  |
| Contact details to SAA members on request: ....................... | YES | NO  |

Please send completed application form with cheque/money order made out to the Submarines Association Australia to;

Mr John Rana, National Treasurer C/o PO Box 6102 Waikiki WA 6169

Phone: 0402 143 211 Email: ranaoxley@iinet.net.au

Details for Payment by EFT:

Bank: AMB (Australian Military Bank) Name: Submarines Assoc Aust Account: 100125212

BSB: 642170

ID: (Surname/Initials) Subs