



THE RAEME ASSOCIATION (Victoria) INCORPORATED

Patron Brigadier K.Ermert ARMIT MS FIE (Retd)

CONFIDENTIAL APPLICATION for MEMBERSHIP

For; ORDINARY Membership of the RAEME Association (Vic) Inc

Mr./ Rank_____ (Full Name) _____

Street_____

Suburb_____ Post Code_____

Date of Birth / / Home Phone N^o() _____ Business() _____

E-mail_____ Mobile_____

Orders and Decorations_____

Last Serving Unit_____

I, the above mentioned, request membership to the RAEME Association (Vic) Inc. and agree to be bound by the Rules and By-law's of the Association

Signed_____ Date / /

Nominated_____ Signature _____ Date_____

Seconded; _____ Signature _____ Date_____

Service Membership: Annual Subscription \$20-00

PLEASE FORWARD THE COMPLETED APPLICATION FORM PLUS PAYMENT

To: The Membership Officer

RAEME Association Vic. Inc.

14 B Mahogany Ave

BERWICK 3806

or

EFT to; alang.37@bigpond.com

Payment by; Cheque Money Order EFT (please circle)

EFT; Bank NAB Berwick BSB 083 547 Acct No 28634 9442

Made out to RAEME Association (Vic) Inc Membership

**Please advise Membership Officer of EFT Payment Details including Your Name
e-mail to; alang.37@bigpond.com**

OFFICIAL USE ON ONLY

Membership No

Receipt No

Recorded as Member

Distribution List

☐☐☐☐