

BALLARAT RADIO MODEL FLYING CLUB Inc.

Web site: www.sehler.net/brmfc

Inc. No. A0001288M

MEMBERSHIP PAYMENT FORM – 2005/2006

Surname First	Name	Middle Name
Address		
Phone: Home: Business:		bile:
Email Address:		
M.A.A.A. Registration Number: AUS	Date of Birth:	
Partners Name Occupation	on/Skills	
Transmitter Frequencies Used:		
 Tick <i>∞</i> membership type below and write amount applicable in column on right hand side of sheet. Note: Pension rates with 10% discount, are shown in brackets (). Proof of pension entitlement must be provided. Includes MAAA insurance charge for all member categories 		
 New member. (Existing members ignore thi Joining fee \$10.00 + \$10.00 refundable gate 		ck)Amount: \$
Senior member plus VMAA fee. – Benefit Definition: Any person over 18 years.	: Voting rights, gate key & no	ewsletter.
Club \$72.00 (\$64.80)		
<u>VMAA \$132.00 (\$125.00)</u> Total \$204.00 (\$189.80)		Amount: \$
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Senior member – Benefits: Voting rights, g Definition: Any person over 18 years.	ate key & newsletter.	
VMAA fee is paid through another club and you		field.
Name of other club:		A
Club \$72.00 (\$64.80)		Amount: \$
 Junior member plus VMAA fee. – Benefits: Voting rights, gate key & newsletter. Definition: Any person under 18 years. Club \$36.00 (\$32.40) – 50% of senior membership fee 		
<u>VMAA \$100.00 (\$100.00)</u> Total \$136.00 (\$132.40)		Amount: \$
10tai \$130.00 (\$132.40)		
Associate member – Benefits: Gate key & newsletter. VMAA fee is paid through another club and you intend to fly infrequently at our field. Probably live remotely. (2/3 of senior member fee.) Name of other club:		
Club \$48.00 (\$43.20)		Amount: \$
Social member – Benefits: Newsletter. Non Club \$18.00 (\$16.20)		ee.) Amount: \$
Family membership – Benefits: Voting ri rate plus \$10. Family members must pay VMA immediate family residing at same address. The Club \$82.00 (\$73.80) VMAA \$132.00 (\$125.00)	A fees as specified (Junior	or Senior). Applies to
Sub-Total \$214.00 (\$198.80)		Amount: \$
Person 2 \$100.00 or \$132.00 (\$100.00 or \$		
Name: D.O.B.		
Person 3 \$100.00 or \$132.00 (\$100.00 or \$		Amount: \$
Name:		Amount: \$
Name:		
<u>Total amount to pay</u>	(Less your Instal	lments \$) <u>\$</u>

A \$5 Administration fee applies, if fees are not paid by 31^{st} July 2005. Please remit this form and the amount payable to the Secretary or Treasurer.