

Royal Scottish Country Dance Society Queensland Branch Inc.

Membership Application/Renewal for 1 July 2023–30 June 2024

Name: _____ Title: _____ First Name: _____

Last Name: _____

Date of Birth[†]: _____

Home Address: _____

Locality: _____ State: _____ Postcode: _____

Mailing Address: _____

As above _____

Locality: _____ State: _____ Postcode: _____

Email Address: _____

Phone: _____ Mobile: _____ Home: _____

Home Club: _____

Participating as: Dancer Musician Teacher Qualifications: _____

I wish to apply for membership of the Royal Scottish Country Dance Society Queensland Branch Inc ("the Branch")
 renew my Branch").

I agree to be bound by the rules of the Society and Constitution of the Branch (including future amendments which may be issued from time to time) for the term of my membership.

I understand the Branch does not carry any personal injury insurance, and I will be responsible for organising such cover should I deem it necessary.

I authorise the Branch to provide my details to the Royal Scottish Country Dance Society in order to register my membership with the society headquarters.

Membership Fees:	<u>Single</u>	<u>Joint</u>	<u>Young Adult</u> [†]	<u>Youth</u> [†]	<u>Associate</u> [‡]
Full Year:	<input type="checkbox"/> \$65	<input type="checkbox"/> \$116	<input type="checkbox"/> \$52	<input type="checkbox"/> \$32.50	<input type="checkbox"/> \$20
Half Year [°] :	<input type="checkbox"/> \$32.50	<input type="checkbox"/> \$58	<input type="checkbox"/> \$26	<input type="checkbox"/> \$16.25	<input type="checkbox"/> \$10
Newsletter:	<input type="checkbox"/> Email (free)	<input type="checkbox"/> Post \$10			
Total:	\$ _____				
Remittance:	<input type="checkbox"/> Cash	<input type="checkbox"/> Cheque	<input type="checkbox"/> EFT to BSB 034-002, a/c 413904, ref. [your name]		

Signature: _____ Date: _____

New Memberships:

Proposed: Name: _____ Signature: _____

Seconded: Name: _____ Signature: _____

Notes:

[†] Date of birth is only required for Young Adult (ages 18–25) and Youth (ages 12–17) memberships.

[‡] Associate membership is only available for those who have a full membership registered with headquarters at another branch.

[°] Half year membership applies if joining between January 1st and June 30th.

Return to RSCDS Qld Branch, PO Box 255, Coopers Plains Qld 4108, or membership@rscds-qld.org.au.