

GRADUATE WOMEN QLD INC.

MEMBERSHIP RENEWAL 2018-2019

ABN: 75315647134



GRADUATE WOMEN QLD INC.

PERSONAL DETAILS

Title:	Given Name/s:	Surname:
Date of Birth	/ /	Former Surname
Home Address:		
Suburb:	State:	Postcode:
Mailing Address:		
Suburb:	State:	Postcode:
Home Phone: ()	Mobile:	
Preferred email:		

ADD ADDITIONAL/NEW QUALIFICATIONS

Qualification:	Institution:	Surname:	Year:
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CIVIL HONOURS

Honour:	Details:	Year:
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GWQ INC. MEMBERSHIP SUBSCRIPTION (PLEASE SELECT FROM OPTIONS BELOW)

Please Note: Membership is based on financial year (i.e. 1 July to 30 June)		
<input type="checkbox"/>	Membership Fee	\$ 85.00
Note: The GWQ subscription includes AFGW/IFUW affiliation fee of \$70.00. GWI affiliation is 25CHF.		
BRANCH GROUP SUBSCRIPTION (PLEASE SELECT FROM OPTION/S BELOW)		
<input type="checkbox"/>	Fellowships Fund Inc (includes GST)	\$ 5.00
<input type="checkbox"/>	Darling Downs Branch	\$ 10.00
<input type="checkbox"/>	Gold Coast Branch	\$ 10.00
<input type="checkbox"/>	Sunshine Coast Branch	\$ 15.00
<input type="checkbox"/>	Donation towards GWQ Inc. Bursary	\$ 10.00
TOTAL PAYMENT		Total \$.00

PAYMENT METHOD

<input type="checkbox"/>	Cheque	<input type="checkbox"/>	Money Order [Please make cheque or money order out to Treasurer GWQ Inc.]	Payment Amount	\$.00
<input type="checkbox"/>	Direct Debit	Account Name: Graduate Women Qld Inc. Bank: Commonwealth Bank BSB No: 064 000 Account No: 00801818 <input checked="" type="checkbox"/> If paying by direct debit, please record your name on the electronic payment slip. <input checked="" type="checkbox"/> Please send your Bank's Confirmation Number or scan your Bank's Confirmation and email to the Treasurer at f.rohde@law.uq.edu.au or the Membership Registrar at delmadoherty@bigpond.com			

DECLARATION: I, the undersigned, hereby apply for Membership of Graduate Women Qld Inc (GWQ Inc.)

SIGNATURE OF APPLICANT: Date: / /

Privacy Statement: GWQ Inc. maintains a database of names, addresses and other information relevant to membership of the Association and for the purpose of mailing information, publications, notification of events etc and providing services and benefits to members. A member may request a copy of personal information held by the Association. If you have any queries, please contact the Membership Registrar. delmadoherty@bigpond.com

Office Use only: Membership No:	Year first joined:	Receipt Issued:	/ /
Please return completed application form with payment to: Treasurer GWQ Inc. PO Box 554, Toowong Business Hub, Q. 4066.			
If payment is made electronically please email signed application form to the Membership Registrar at: delmadoherty@bigpond.com			