

Membership Application / Renewal for 2021-2022

Please PRINT your details clearly below and tick as required.

I wish to **join** **renew my membership** in the Camden Area Family History Society Incorporated.

First Name (1) **Family Name (1)**

Birth Date. Day **Month** **Year**

First Name (2) **Family Name (2)**

Birth Date. Day **Month** **Year**

Address.....

..... **Post Code**.....

Contact Phone No.

Email Address

If you provide your email address the Society can notify you of upcoming events, meetings and guest speakers and keep you advised of Society matters. We can provide you with our newsletter electronically to read.

Camden Area Family History Society Incorporated recognises the importance of protecting your privacy. We will only use the information provided to directly communicate with you. Information provided through this Application for Membership form is used only by the Society and is not used, sold or given to any third parties.

Membership

Normal Membership Single \$ 30 Couple and families \$ 35 Donation \$

Pensioner/Concession Membership Single \$ 25 Couple and families \$ 30 Donation \$

All membership fees are inclusive of GST and fall due at the end of June each year. Donations above \$2 to the Camden Area Family History Society Inc. are Tax Deductable. An official Tax Receipt will be issued upon payment of fees and any donation provided. Membership entitles you to participate in the affairs of Camden Area Family History Society Inc. as well as access to the full resources available in our Resource Room at Camden Library Complex, 40 John St Camden. You will also receive a twice yearly edition of the Society's Journal *Camden Calling* by email (or available in Room for collection. The *Camden Calling* may be posted to members upon request) and the Society Newsletter, *The Valley Voice*, via email and is available at our Monthly meetings on the 1st Tuesday of each month (January excepted). Your membership fees and any donations provided, assist the Society in providing and maintaining a comprehensive collection of resources for the purpose of maintaining our Family Heritage.

Please return your Membership Application/Renewal form with payment to: **CAFHS PO Box 679 Camden NSW 2570**

Payment accepted by Cash, Cheque, however EFT or Direct Deposit is the preferred payment method.

EFT Details are: **BSB: 802-388 Account: 45890**

Don't forget to add **Reference: Your Name** and also **M** for Membership fees or **R** for Research fees.

Web: www.cafhs.org.au

e-Mail: cafhs2570@gmail.com

Date Receipt Number

Amount Received \$ Cash/Cheque Database updated

You may complete the following Research details indicating your areas of interest in your research.

Name:		Name:
Country:		Country:
Years of Interest:		Years of Interest:
Any Additional Information:		Any Additional Information:

Name:		Name:
Country:		Country:
Years of Interest:		Years of Interest:
Any Additional Information:		Any Additional Information:

Name:		Name:
Country:		Country:
Years of Interest:		Years of Interest:
Any Additional Information:		Any Additional Information:

Would you like this information to be published in the Society's Journal "Camden Calling"? Yes No