



THE RAEME ASSOCIATION (Victoria) INCORPORATED
Incorporation No.A0022655Z1 ABN; 96 873 522 994

Patron Brigadier K.Ermert ARMIT Msc FIE Aust CPEng (Rtd)

CONFIDENTIAL

APPLICATION for MEMBERSHIP

DELETE if not Applicable

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

Mr/Mrs _____
(Full Given Names)

(Surname) _____

Street _____

Suburb _____ Post Code _____

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

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 _____ Membership No _____ Date / /

Seconded; Signature _____ Membership No _____ Date / /

Ordinary Members: Annual Subscription \$20-00
Associate Members: Annual Subscription \$15-00

PLEASE FORWARD THE COMPLETED APPLICATION FORM PLUS PAYMENT

To: The Membership Officer
RAEME Association Vic. Inc.
Mr. Gus Allen
328 Highbury Rd
Mount Waverley Vic 3149

OFFICIAL USE ONLY

Membership No _____ Receipt No _____ Recorded on Membership List _____ Remarks _____

N^o _____ N^o _____ Register, Mail, Members & Financial _____