



ROYAL AUSTRALIAN ARTILLERY ASSOCIATION WA (Inc)

APPLICATION FOR MEMBERSHIP

I wish to apply for ORDINARY/ASSOCIATE membership of the Association:-
(select as applicable)

Family Name:		Given Names:	
Address		Suburb:	Post Code:
Title:	Decorations:		
Home Telephone No:	Work Telephone No:	Mobile No:	
Civil Occupation:		Email address:	
Last Rank Held:	Unit / Battery:	Last Posted Position:	
Period of Service/ Dates		Circle following status:	
		Serving / Discharged / Retired / Inactive list	

Signature Date

Application endorsed by _____

Name of member

Signature

Date

If accepted, subscription is currently \$15 per annum for ordinary members

Date received _____
Entered on Member's Roll _____
Entered on Email list _____
Copy of Constitution supplied _____

**Any enquiries may be directed to Hon Secretary,
RAA Association WA, PO Box 881 Claremont WA 6910,
Mobile 043 869 5711
Email: info@artillerywa.org.au**