



Member Application Form

Surname: _____ Given Names: _____

Telephone Number: _____

Address: _____

Email Address: _____

Membership fee: \$10.00 per calendar year

Signature: _____ Date: _____

Payment can be made via cheque, money order or EFT payment:

Cheque and money order sent to:

XL Arts inc.

Att: Treasurer

PO Box 7112, Richmond VIC 3121

Bank Transfer Payment:

Account Name: XL Arts inc.

BSB: 063-165

Bank Account Number: 1044 6492

Form may be sent via e-mail to admin@xlarts.org

Office Use:

Membership Number: _____

Fee receipt number: _____

Date Received: _____