

Macarthur Astronomical Society Inc.

P.O. Box 17, MINTO, NSW 2566
www.macaastro.org.au
contact@macaastro.org.au

Membership Application/Renewal Form

Date: (dd/mm/yyyy)

Name:

Address:

.....

.....

Phone:

E-mail:

Date of Birth:/...../..... (dd/mm/yyyy)

Occupation:

I declare that I own a legal laser pointer:

Yes No

Note: Membership does not protect any member from lawful prosecution if found guilty of misuse. Refer to the MAS Laser Usage Policy.

I hereby apply for Membership of the Macarthur Astronomical Society Inc. as per the following:

Full

Family

Limited Family

Student

Pensioner/Retiree

For current fee rates and conditions please refer to www.macaastro.org.au under *Membership/Join*.

Application Fee – AU\$15 (once off, for each application, applies to all new applications)

TOTAL PAYMENT AU\$

Cheque EFT (1) PayPal (2) Cash (3)

(1) EFT to: BSB 062 340 A/C 10029861
Please add your name in the reference field.

(2) PayPal to: contact@macaastro.org.au

(3) Cash at monthly meetings only.

By payment of the above non-refundable membership fee I agree to be bound by the rules of **the Society as set out in its Constitution and By-Laws.**

(Copy available on the website under *About Us*.)

Interests: deep sky planetary/lunar/solar spectroscopy radio astronomy astrophotography

Astronomical Equipment:
(not a prerequisite)

Additional family members (spouse/partner, children under the age of 18):

	Name	Relationship	Age	E-mail (if available)
#2				
#3				
#4				
#5				

Applicant's Signature:

Office Use: Approved Declined **Date**