

Macarthur Astronomical Society Inc.

Membership Application/Renewal Form

www.macastro.org.au contact@macastro.org.au

Date:(dd/mm/yyyy)		I hereby apply for Membership of the Macarthur Astronomical Society Inc. as per the following:	
		Individual	
Name		Family	
Address		Limited Family Student	
Address		Pensioner/Retiree	
		For current fee rates and conditions please refer to	
		www.macastro.org.au under Membership/Join.	
Phone		Application Fee – AU\$17 (once off, for each application, applies to all new applications)	
E-mail		TOTAL PAY	MENT AU\$
Age (Optional)		EET to : DSD 062240 A/C 10020961	
Occupation (Optional)		If you need to pay by alternate means contact the President at contact@macastro.org.au	
I declare that I own a legal laser pointer:		resident at contact@macastro.org.ad	
O Yes O No		By payment of the above non-refundable membership fee I agree to be bound by the rules of	
Note: Membership does not protect any member		the Society as set out in its Constitution and By-Laws.	
from lawful prosecution if found guilty of misuse. Refer to the MAS Laser Usage Policy.		(Copy available on the website under About Us.)	
Interests: Astrophotography Visual Deep Sky Planetary Lunar Solar Other			
Astronomical Equipment: (Optional)			
Where did you hear about MAS ?			
What made you want to join MAS ?			
For Family Memberships - Additional family members (spouse/partner, dependants under 18 years old)			
Name Relationship		Age	E-mail (if available)
	•		
I declare that I am 18 years or older (Applicant's Signature)			
Office Use:			