

GCFHS New Membership Application

Gold Coast Family History Society Inc. p: 07 5582 8855



E. Family Applicant's Name Siven Name Address Best Co	Preferred Name 1. eg; known as Preferred Name 2. eg; known as ontact No.
2. Family Applicant's Name Siven Name Address Best Co	Preferred Name 2. eg; known as ontact No.
Siven Name Surname Best Co	Preferred Name 2. eg; known as ontact No.
Siven Name Surname Address Best Co	2. eg; known as ontact No.
Address Best Co	ontact No.
Address Best Co	ontact No.
Email Address	
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Mambarahin 9 Card	
Membership & Card Your Membership Card or Cards will be posted to the address provided.	
f you have any questions please call 07 5582 8855 during opening hours	S.
Life Membership is available after two years of continuous membership: S	Single \$450 or Family \$600
Membership Fee + Joining Fee Membership Fee + Joining Fe	
O Single: \$45 + \$10 = \$55.00 O Single: \$45 + \$10 + \$5 = \$	
O Family: \$60 + \$10 = \$70.00 O Family: \$60 + \$10 + \$5 =	\$75.00
Payment Method O Bank Deposit O Cheque O Cash - In person	only
Bank Details: Gold Coast Family History Society Inc.	previous
	nber please tick ()
Fees - can be paid either at the Rooms during opening hours, by post or by bank	deposit.
Please include your surname in the Bank Reference field.	
Do you wish to receive a copy of our monthly e-newsletter 'Saplings' via	email? () Yes () No
Would you like to receive a copy of the 'Rootes' e-Journal online?	() Yes () No
New members name & postcode are published in our Journals, do you agree?	()Yes ()No
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*Your paid printed Journal, is available for pickup or can be posted; please	e select. () Pickup () Posted
/We hereby apply for membership of the Gold Coast Family History Socie	ety Inc. and agree to be
bound by the rules of the Society. OI/We Agree please tick	
1. 2. Signature Signature	
	Use Only
ricase post of email this form with your payment to the.	bership No:
Membership Secretary, PO Box 2763 Southport BC Qld 4215	Payment Completed O Receipt No Details Updated O MailChimp