

**MEMBERSHIP APPLICATION / RENEWAL FORM**

The Secretary  
Hindu Association of WA (Inc.)  
P O Box 53  
**WILLETTON WA 6955**  
...../...../2007

Dear Sir/ Madam

**I / we wish to become a member / life member / renew my / our existing membership** of the Hindu Association of W A (Inc.). **I / we** enclose a cheque/cash\* for the sum of \$ **.....00 being the subscription for the period 1 July 2007 to 30 June 2008.** Kindly issue me an official receipt at your earliest convenience.

*Please strike out which ever is not applicable*

*\* Payment received subject to application being approved by the Management Committee.*

My/our particulars are as follows:

Name: Dr/ Mr / Mrs / Ms / Miss.....

Address (Home) .....

.....Post Code.....e-mail address: .....

Contact-Telephone:(Home).....(Work).....(Mobile).....

**Dependent Details (If applicable ) :**

Name of spouse: Dr / Mr / Mrs.....

Children (If any): Boy(s)..... Girl(s).....

Children (18 years and over), do wish to participate in Temple Youth Group activities. YES/NO

Yours faithfully

..... (Date: )

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**MEMBERSHIP TARIFF**

**ORDINARY :** Senior citizens/ Concessions: \$ 21\* Individual: \$ 31\* Family : \$ 51\*

**LIFE :** Single/Pension/Concessions: \$1001 Family : \$1501

Application received on..... Committee approved on .....

Member notified on..... Membership No:.....

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**Privacy statement**

*Personal information you supply will be used by the Temple in conducting the business of the Temple only. The business of the Temple includes matters related to temple administration, temple functions, temple fund rising, etc. All information collected is confidential, and will not be disclosed to third parties unless:*

- the member(s) has authorised its release
- required by law

*The Temple will always try to maintain accurate, complete and up-to-date information, and can only be done with your help. If you think that your personal information retained by the Temple requires changing, please contact the Temple Committee.*