



# Genealogical Society of Queensland Inc.

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# 2010 MEMBERSHIP APPLICATION

TAX INVOICE

ABN 46 025 286 168

First Member		Second Member (Family Membership only)	
Preferred title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr		Preferred title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr	
Family name		Family name	
Preferred first name to appear on membership card		Preferred first name to appear on membership card	
Residential address Postcode _____		All correspondence, including the Society's quarterly journal, Generation, will be mailed to the First Member's postal address as shown at left.	
Postal address (if different from above) Postcode _____			
Telephone (incl. code) _____		Telephone (incl. code) _____	
E-mail address *		E-mail address *	
*E-news <input type="checkbox"/> Include me on list <input type="checkbox"/> Remove me from list		*E-news <input type="checkbox"/> Include me on list <input type="checkbox"/> Remove me from list	
Membership Type <input type="checkbox"/> Direct <input type="checkbox"/> Branch _____		Membership Type <input type="checkbox"/> Direct <input type="checkbox"/> Branch _____	
<b>I/We hereby apply for membership of the Genealogical Society of Queensland Inc. and agree to be bound by the rules of the Society.</b>			
Signature _____ Date ____/____/____		Signature _____ Date ____/____/____	
How did you find out about the Society? <input type="checkbox"/> Advertising <input type="checkbox"/> Friend <input type="checkbox"/> Library display <input type="checkbox"/> Website <input type="checkbox"/> GSQ Event <input type="checkbox"/> Other _____			
<b>PAYMENT CALCULATION</b>			
<b>Single</b>	<input type="checkbox"/> 1 year fee \$69.80	<input type="checkbox"/> 3 year fee \$161.50	\$
<b>Family</b>	<input type="checkbox"/> 1 year fee \$104.80	<input type="checkbox"/> 3 year fee \$254.50	\$
All fees include GST & \$11.50 one-off joining fee			<input type="checkbox"/> <b>Journal only \$21.00</b>
<input type="checkbox"/> <b>Donation GSQ Library Fund</b> (all donations over \$2 are tax deductible)			\$
<input type="checkbox"/> <b>Donation GSQ Building Fund</b>			\$
<b>METHOD OF PAYMENT</b>			<b>TOTAL</b>
<input type="checkbox"/> Cash (AUD\$ only) <input type="checkbox"/> Cheque or Aust. Money Order (made payable to GSQ Inc) enclosed			\$
<input type="checkbox"/> Credit Card. Please charge my <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa			
Credit Card No. _____		Expiry Date ____/____/____	
<b>CARD HOLDER'S AUTHORISATION</b>			
Name as it appears on credit card (Please print)		Cardholder's signature X	
		Date ____/____/____	

LIBRARY/OFFICE USE ONLY			
Received ____/____/____	Receipt No. _____	Renewal Date ____/____/____	
Memberships Numbers (1) _____		(2) _____	
New Card: <input type="checkbox"/> Given <input type="checkbox"/> Posted	Register Updated ____/____/____	Cap <input type="checkbox"/> Mailing List <input type="checkbox"/>	