

# Canberra & District Historical Society Inc.

Curtin Shopping Centre

## APPLICATION FOR MEMBERSHIP

I/we

Surname(s) Please use block letters

Given Name(s)

Title

Postal address

Home address (if different from above)

Email address

Telephone (h)

(w)

(mobile)

Hereby apply for membership of the Canberra & District Historical Society Inc. In the event of admission to membership, I/we agree to be bound by the rules of the Society for the time being in force.

Signature(s)

Date

Type of membership (please tick relevant box)

	1 Year		2 Year		1 Year		2 Year		
Single	46	<input type="checkbox"/>	86	<input type="checkbox"/>	Full time student	33	<input type="checkbox"/>	60	<input type="checkbox"/>
Joint	53	<input type="checkbox"/>	100	<input type="checkbox"/>	Educational Institutions	46	<input type="checkbox"/>	86	<input type="checkbox"/>
Pensioner	33	<input type="checkbox"/>	60	<input type="checkbox"/>	Corporate	100	<input type="checkbox"/>	194	<input type="checkbox"/>
Senior Card	44	<input type="checkbox"/>	82	<input type="checkbox"/>					

Donation

I wish to pay by: cheque  cash  money order  credit card

Credit Card No.:

Name on Card: \_\_\_\_\_ Expiry Date \_\_\_\_\_

Signature:

Date

Mastercard

Visa

## **Additional Information (Optional)**

1. Special areas of interest/expertise in history

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2. Are you available to give talks on historical subjects to interested groups ? Please specify topics.

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3. Are you willing to become involved in any other activities of the Society? Please specify.

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### **Canberra & District Historical Society Office**

**Location:**

Curtin Shopping Centre  
(entrance from Strangways St. carpark)

**Postal Address:**

PO Box 315  
Curtin ACT 2605

**Tel:** (02) 6281 2929

**Email Address:**

[admin@canberrahistory.org.au](mailto:admin@canberrahistory.org.au)

**Internet Address:**

[www.canberrahistory.org.au](http://www.canberrahistory.org.au)

**OFFICE HOURS**

11.00 am – 5:00 pm  
Tuesdays and Wednesdays (except public holidays)