

Community Alliance SA Inc
PO Box 520
Goodwood, SA 5034
ABN: 56 505 508 381

Engaging for Reform



MEMBERSHIP RENEWAL FORM 2021-21

You are invited to apply/renew your membership of Community Alliance SA Inc for 2020-21. Membership is open to associations which confers voting rights at the AGM, while individuals can register as “friends” and be included on our mailing list.

Association Name: _____

Contact Person: _____

Contact person's title/position: _____

Address: _____

_____ Post code: _____

Email: _____

Phone: _____

Date: _____

Membership renewal/new member: **\$ 45.00**

Optional donation for campaign costs: \$

TOTAL \$ _____

The following payment options are available. Should you require any further assistance or information please email sa.community.alliance@gmail.com. Please indicate:

___ Direct deposit transfer (EFT)
Account name: Community Alliance SA Inc
BSB: 633 108 (Bendigo Bank)
Account number: 144463874
Reference: ***Please include your associations' name or contact person***

___ Or, cheque made payable to: Community Alliance SA Inc.

Please return this form with payment or payment details to Community Alliance SA Inc. Scan and email to sa.community.alliance@gmail.com, or post to PO Box 520, Goodwood, SA 5034. Receipt issued on request.

Community Alliance Inc will not release any information about your membership details without your permission. Members agree to be bound by the Objects and Rules of the Association for the time being in force. To view the constitution, go to www.communityalliancesa.org.au.