

# VIDEOMAKERS WA Inc.

www.vmwa.org.au



## Applicant details - please print clearly

Surname	First Name
Address	
Suburb	Postcode
Contact phone	Email
Occupation (completion optional)	

Please indicate the type of membership required:

Full: \$10.00 pa

Associate: \$10.00 pa

Associate membership is available to a new member who:

- already has another family member as a Full member of Videomakers WA Inc. or
- lives more than 100 km from the Perth CBD or
- is less than the age of 18 years at the time of application

The sum of \$ \_\_\_\_\_ is attached for membership of Videomakers WA Inc. I undertake to abide by the constitution of Videomakers WA Inc., which is available for viewing on the Videomakers WA Inc. web site.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Membership of Videomakers WA Inc is subject to approval by the Committee.  
Videomakers WA Inc is not bound to accept this or any membership application.

Forward this form plus the appropriate fee to the Treasurer, or give to the Treasurer at the next members' meeting. Cheques should be made payable to Videomakers WA Inc.

*VMWA Treasurer  
21A Fleming Close  
Morley  
WA 6062*