



Membership Application Form

Family Name		Gender	
Given Name		Preferred Name	
Address			
Suburb		Postcode:	
Mobile		Home Phone	
Email			
Year of Birth *		Country of Birth	

Emergency Contact Details		Name	
Relationship		Phone	

I consent to receive correspondence by email:	Yes	No
I consent to my photo being published in U3A newsletters and promotional materials	Yes	No
Do you have any special needs?	Yes	No
Would you be prepared to act as a Tutor, Leader or Volunteer Helper? If so, in what area?	Yes	No
How did you hear about U3A Cranbourne?		

I hereby apply for membership of U3A Cranbourne and agree to act in accordance with U3A membership conditions			
Signed:		Date:	

Important:
<i>Please note that membership fees cannot be refunded</i>
<i>* Members must be 50 or older and no longer working full time. This requirement will be strictly enforced.</i>
Privacy: U3A Cranbourne is committed to safeguarding your personal information in accordance with the Privacy and Data Protection Act 2014 (VIC) (PDP Act)