

**MEMBERSHIP FORM 2024**

TAX INVOICE

Membership renewal or  New member

Mr/Ms/Mrs/Miss/Dr Preferred First Name: \_\_\_\_\_ (for Name Badge)

Surname: \_\_\_\_\_ ABF No \_\_\_\_\_

Address: \_\_\_\_\_ Postcode \_\_\_\_\_

Phone: (H) ( ) \_\_\_\_\_ (W) ( ) \_\_\_\_\_ (M) ( ) \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth<sup>\*\*</sup>: \_\_\_\_/\_\_\_\_/\_\_\_\_  
\*\*Please note that the ABF requires at least the date and the month.

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Name & Relationship)

Your Home Club is responsible for paying your ABF capitation fee and administering your participation in the Masterpoint Scheme. Do you want Sydney Bridge Centre to be your HOME CLUB?

YES  NO  My home club is \_\_\_\_\_

*Annual membership runs from now to 31<sup>st</sup> December. Pro rata rates apply from April for new membership only.*

\$85 Ordinary Membership or  \$60 Concession Membership (tick below)

Full Pensioner, pension no. CRN \_\_\_\_\_

Fulltime student (26 or under)

Not resident in Sydney

*Membership fee includes GST*

**NAME BADGE** (please tick preferences) I haven't had one and would prefer a  magnetic or a  pin clip attachment  
 I would like another one at \$5.5 with  magnetic or a  pin clip attachment  
 I would like to pick it up from  City (Goulburn St)  Canada Bay

**Note: All members of the NSW Bridge Association agree to be bound by the NSWBA's Constitution.**

Signature _____	Date ____/____/____
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**Payment Options:** Direct Transfer, [Credit Card](#), Cheque, EFTPOS or Cash. PP is accepted for members ONLY.

Direct Transfer to **NSWBA** BSB **082-088** A/C **03 909 8420** Reference: **ABF No + Name**

(Please email [office@SydneyBridgeCentre.com](mailto:office@SydneyBridgeCentre.com) with your Name, Amount and Date of transfer.)

**Office use only**

Date Received	Amount Received	Receipt Number (Cash only)	ABF PA WE PE CNL NB
/ /	\$ CC/CASH/PP		[ ] [ ] [ ] [ ] [ ] [ ]