

U3A Gold Coast Inc.

2026	NEW MEMBER	RENEWAL
SEMESTER 1 & 2	\$110 <input type="checkbox"/>	\$100 <input type="checkbox"/>
SEMESTER 1 <input type="checkbox"/>	\$60 <input type="checkbox"/>	\$60 <input type="checkbox"/>
SEMESTER 2 <input type="checkbox"/>	\$60 <input type="checkbox"/>	\$60 <input type="checkbox"/>

I understand that membership is conditional on Committee approval and, if accepted, I agree to be bound by the rules of U3A Gold Coast Inc. Please check to ensure there is a vacancy in the classes you wish to attend.

PRIVACY ACT 1988:

Amendments to the above Act in December 2001 do not allow U3A Gold Coast Inc. to publish address or phone number if a member notifies us to the contrary. If you do not want your street address published on our membership list, please provide Post Office Box number as an alternative. STREET ADDRESS IS COMPULSORY BY LAW FOR ADMINISTRATION FILES. The information provided is for Registration records, which we are obliged to keep as a non-profit organisation.

Registration Cost includes Non-refundable Joining Fee of \$10 (A surcharge of \$1 for payment by EFTPOS or Credit Card)

NAME

MEMBER NUMBER:

(Block letters please)

PREFERRED NAME ON BADGE _____

HOME PHONE _____ **MOBILE** _____

EMERGENCY CONTACT NAME: _____ **PHONE:** _____

YOUR EMAIL:

PLEASE PRINT CLEARLY

ADDRESS _____

(Street address is ESSENTIAL - PO Box optional)

SUBURB _____

POSTCODE _____

YEAR OF BIRTH _____ **GENDER:** FEMALE ☐ MALE ☐ OTHER ☐ PREFER NOT TO SAY ☐

Please tick box if you are willing to volunteer as a:

Tutor ☐ Subject _____

Receptionist or Admin Assistant ☐ Committee Assistant ☐ Handyman/ Electrician ☐

Where did you hear about U3A Southport? _____

SIGNATURE _____

DATE _____

Office Use Only

DATE: **RECEIPT NO.** **RECEIVED BY:** **BADGE COLLECTED** ☐

Cash: ☐ Card: ☐ Amount: \$ _____

Processing

Entered by:

Date: