



ISLAMIC SOCIETY OF SOUTH AUSTRALIA

Office Use Only

Membership No

Date Recorded

C/o Membership Secretary, 658 Marion Road, Holme Park SA 5043
T. 0433428985 E. info@islamicsociety.org.au W. islamicsociety.org.au

All prospective members of The Islamic Society of South Australia are required to complete this registration form and return it with payment prior to membership approval. All details will be kept in a secure database with access restricted to authorised society officers only.

NEW MEMEBR

RENEWAL

SECTION 1: MEMBER CONTACT INFORMATION

TITLE	Mr/Mrs/Miss/Ms (Please circle)		
FULL NAME			
ADDRESS 1			
		DATE OF BIRTH	D: /M: /Y:
ADDRESS 2		HOME PHONE	
TOWN		MOBILE PHONE	
POST CODE			
EMAIL			

SECTION 2: FAMILY MEMBERS (IF SIGNING UP AS FAMILY ONLY)

FULL NAME	DATE OF BIRH	MOBILE NUMBER	EMAIL

Membership Annual Fees: \$30 for individuals or \$25 per person if signing up as a family. (Must be immediate family only)

Payment can be made by:

- Cheque payable to the Islamic Society Of South Australia
- Bank Deposit: BSB: 065000 ACC: 11358279 (**NOTE Please Include Full Name**)
- Cash

To ensure that we have the correct contact details for you, please complete the information requested and return the form to the above address. This information will be used to keep you informed about social events and to contact you in the event of an accident or incident.

IMPORTANT: By signing this form, the member agrees to:

1. Abide by the rules of the constitution of the Islamic Society of South Australia.
2. Abide by directives as determined by the Committee and Officials of the Society from time to time.
3. Members shall not join any organisation or society or commit any criminal offence that is in conflict with the laws of their country and those of the Society.
4. Pay all applicable fees as and when they become due.

Signature Date/...../..... Total Fees Remitted \$

IMPORTANT: MEMBERS MUST PRESENT THE SIGNED MEMBERSHIP FORM WITH SUITABLE IDENTIFICATION FOR VARIFICATION OF NAME AND ADDRESS. FURTHERMORE MEMBER MUST BE 18 YEARS OR OLDER TO JOIN.

Office Use Only:

Received By:..... Position:..... Signature:.....

Received Date	ID Sighted	YES / NO	ID Type	Receipt number