



Membership application

Applicant Information

Title Ms Mrs Miss Mr Other

Full Name: _____
Last First Second

Business Name or Organisation: _____

Address: _____

Suburb: _____ Post Code _____

Phone: _____ Mobile: _____

Email: _____

Membership Level

Please tick which one you are applying for:

- Platinum Level – per annum \$375.00
- Platinum Level – per month \$35.00
- Affiliate Level – per annum \$250.00
- Affiliate Level – per month \$23.00

Payment Options

- Direct Deposit – WBC to Uniting Bookkeepers
BSB: 032 501 Account No: 17 8890
- Cheque: Made payable to Uniting Bookkeepers and Mail to:
PO Box 3237, Valentine NSW 2280
- Credit Card – Visa or MasterCard accepted

Name on Card: _____

Card Number:

Expiry Date: ____/____

PLEASE FAX THIS FORM TO 02 4946 1579
Your membership will be confirmed via email or post along with a Tax Invoice.