



History Redcliffe
PO Box 370,
REDCLIFFE QLD 4020

MEMBERSHIP APPLICATION

Name: _____

Address: _____

Ph Work: _____

Ph Home: _____

Mobile: _____

Email: _____

I/We the undersigned hereby wish to apply for membership of History Redcliffe and enclose the sum of \$_____ being for membership fees for the year ending 30th June _____

I/We agree to abide by the rules of the Society.

Signature: _____

Single Membership \$20, Family Membership \$35 & Business Membership \$35. Send completed form to:

History Redcliffe,
PO Box 370,
REDCLIFFE QLD 4020