THE RETURNED & SERVICES LEAGUE OF AUSTRALIA

WESTERN AUSTRALIA BRANCH INCORPORATED

Membership Renewal

Due 1st January

Sub Branch:_____

Service Number: _____

Name:

_____

Address:_____

_____ **Postcode:** _____

CHANGE OF ADDRESS

FILL IN THE DETAILS BELOW

Street……

Suburb……..

Postcode……..

State……..

Telephone……

PAYMENT DETAILS

Membership Fee	$40.00
Welfare Donation	$.....
TOTAL	$.....

CREDIT CARD DETAILS

☐ Please debit my Credit Card

☐ Visa ☐ Mastercard

Expiry Date:……..……..

For $ .....

Cardholder's Name ……..

Signature:……