



THE AUSTRALIAN NATIONAL CHORAL ASSOCIATION

ABN 84 529 930 920 --- ARBN 097 629 448

MEMBERSHIP APPLICATION FORM

Return to:
Administration
Po Box 1942
Toowong DC
Qld 4066

Email: admin@anca.org.au

Membership Application

INDIVIDUAL SCHOOL / CHOIR INSTITUTION

APPLICANT NAME _____
POSTAL ADDRESS _____ SUBURB _____
STATE _____ POSTCODE _____
TEL (W / H) (____) _____ (M) _____ FAX (____) _____
EMAIL(Please print) _____

Choir/School details

CONDUCTOR'S NAME _____

CONTACT'S NAME (if not conductor) _____

REHEARSAL VENUE _____

NUMBER OF MEMBERS IN CHOIR 1 – 15 16 – 35 36 – 60 60 – 100 100+

MEMBERSHIP WILL BE PRO RATA TO June. (Full 12 months cost listed incl GST)

PLEASE TICK BOX

- SCHOOL CHOIRS \$77.00
- CHOIRS (Community/youth/church etc.) \$77.00
- INDIVIDUAL MEMBERSHIP \$66.00
- CONCESSION (Choristers/student/ pensioner only) \$44.00
- INSTITUTION (subject to council approval) \$110.00

INSURANCE: (no pro rata rate)

- Personal Accident Insurance \$40.00
- Public Liability Insurance: \$282.29

If you require insurance, please download an insurance application form from our website www.anca.org.au

TOTAL: \$ _____

Method of Payment:

CHQ CREDIT CARD EFT to BSB 034 063 # 269440

CARD TYPE Visa / Mastercard

NAME ON CARD: _____ CREDIT CARD EXPIRY DATE: _____ / _____

SIGNATURE: _____ TODAY'S DATE: _____