

MUDGEE DISTRICT U3A ENROLMENT FORM



Mudgee District U3A

If you are enrolling by post and would like a receipt,
please include a self-addressed, stamped envelope.

Postal address:

Mudgee District U3A
PO Box 469
Mudgee 2850



THE UNIVERSITY OF THE THIRD AGE

MUDGEES DISTRICT U3A ENROLMENT FORM

ENROLMENT DATE: _____

FIRST NAME: _____

LAST NAME: _____

RESIDENTIAL ADDRESS: _____

_____ POST CODE: _____

POSTAL ADDRESS: _____
(If different from above)

_____ POST CODE: _____

PHONE: (Home) _____ Mobile: _____

EMAIL ADDRESS: _____

ONLY print your email address, if you wish to receive Newsletters and Notices by email.

EMERGENCY CONTACT:

NAME: _____

RELATIONSHIP: _____

PHONE: (Home) _____ Mobile: _____

PRIVACY STATEMENT:

Mudgee District U3A collects personal information from members for organisational, communication, emergency and insurance purposes only. This information is held confidentially and will not be provided to any third-party individuals or organisations without the consent of the member.

PLEASE COMPLETE THE CLASS REGISTRATION TABLE

The course code (CC) can be found next to the course name in the program



To help strategic planning and development, we would like to collect information on the age structure of our members. If you are happy to help, please tick the appropriate box for your age group.

Under 55	<input type="checkbox"/>	55-59	<input type="checkbox"/>	60-64	<input type="checkbox"/>	65-69	<input type="checkbox"/>
70-74	<input type="checkbox"/>	75-79	<input type="checkbox"/>	80+	<input type="checkbox"/>		

Signed: _____

Date: _____

PLEASE TICK METHOD OF PAYMENT:

Cash

Cheque

Cheques payable to: Mudgee District U3A

Direct Deposit

Direct Deposit Information:

Account Name: *Mudgee U3A*

BSB: 082-726

Account Number: 396808275

Your payment reference: Write your own name or phone number.

For Office Use Only:

Receipt Number: _____