



# SoFiA

## Membership Application

1. NAME(S ) 1.....

2.....

ADDRESS .....

..... STATE .....

POSTAL ADDRESS .....

..... STATE .....

PHONE ..... EMAIL .....

SIGNATURE (required) (1).....

(2).....

2. How do you wish to receive the SoFiA Bulletin?

Email

Post

3. How are you paying? Please tick the appropriate box.

Cheque/money order enclosed

Bank transfer to Sea of Faith in Australia Inc.

Donation included

From time to time SoFiA circulates member names within the Network for the purpose of advertising our activities. Please tick this box if you do not wish your name to be included.

Please post to           The Membership Secretary  
                                  14 Richardson St  
                                  Lane Cove  
                                  NSW 2066

Or scan and email to: [sofnetwork@gmail.com](mailto:sofnetwork@gmail.com)