



## Membership Application

Membership of \$20 is valid for 10 years.

Name			
Address			
	City/suburb		State
Phone		Email	
Signature (required) [Type name or paste clip of signature]			
Payment method	<input type="checkbox"/> Bank transfer to Sea of Faith in Australia Inc. of \$20 <input type="checkbox"/> Cheque/money order for \$20 enclosed <input type="checkbox"/> Donation included (optional): \$ (SOFiA is a registered charity: see <a href="http://www.acnc.gov.au/charity">www.acnc.gov.au/charity</a> )		
Preferences	<input type="checkbox"/> From time to time SoFiA circulates member names within the Network for the purpose of advertising our activities. Please tick this box if <u>you do not wish</u> your name to be included.		

Please email your completed form to: [sofnetwork@gmail.com](mailto:sofnetwork@gmail.com)  
(our bank details can also be obtained from this address)

or post to:

The Secretary  
SOFiA  
1 Wallace St  
Newtown Q.4350