

THE SWEDISH CLUB
P.O. BOX H92, AUSTRALIA SQUARE
SYDNEY NSW 2000

APPLICATION FOR MEMBERSHIP OF THE SWEDISH CLUB 2011

NAME: _____

COUNTRY OF BIRTH / NATIONALITY: _____ / _____

HOME ADDRESS: _____

SUBURB: _____ POST CODE: _____

PREFERRED CONTACT PHONE NUMBER: _____

EMAIL ADDRESS: _____

ANNUAL MEMBERSHIP FEE: \$ 35.00

JOINING FEE \$5.00

DONATION: \$ _____

TOTAL: \$ _____

1. **CREDIT CARD PAYMENT:** Complete the **details** below (in print) and sign for VISA/MASTER-CARD payments. Please **send** the form to The Swedish Club at the above address.

2. **CHEQUE PAYMENT:** Please **send** the form with your cheque to The Swedish Club at the above address.

CARD NUMBER: _____ / _____ / _____ / _____ EXP _____ / _____

NAME ON CARD: _____

SIGNATORY: _____