



RAEME Association of WA
C/O 13 CSSB 113 Workshop Coy
KARRAKATTA WA 6010

APPLICATION FOR MEMBERSHIP TO THE RAEME ASSOCIATION OF WA.

I _____
(Full Name) (Surname in BLOCK Letters)

Address: _____

City or Town: _____ Postcode: _____

Home Phone No: _____ Bus. Phone No / Mobile: _____

Email: _____

Desire to become an Ordinary/Associate member of the RAEME Association of WA.

Last Servicing Unit: _____ Service Number: _____

Medals and Decorations (If applicable): _____

If you are a member of a sister Corps of RAEME, which Corps ? _____

In the event of my acceptance and admission as a member, I agree to be bound by the Rules of the Association as long as I am a member.

Applicant's Signature: _____ Date: _____

Optional extra details:

Do you have a Facebook Profile? _____ Do you have a Linked-in Profile? _____

Are you an RSL member? _____ If so which Sub Branch? _____

I am also a member of this military club: _____

Note: Application is preferred direct at: www.wa.raeme.org.au/index.php/membership alternately the membership subscription fee of \$20.00 per annum can be paid directly into the following bank account. Ensure to include your surname in the electronic transaction.

BSB - 806-015

Acc # - 01521543

Acc Name - RAEME Association WA

If you cannot apply online email this form to secretary@wa.raeme.org.au or mail to:

The Secretary

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