



Radio & Electronics Association of Southern Tasmania Inc.

GPO Box 371 Hobart Tasmania 7001

<http://reast.asn.au>

MEMBERSHIP RENEWAL FORM

Membership Officer
REAST Inc
GPO Box 371, Hobart, Tasmania. 7001
Telephone 03 62343553

BSB: 037 001
Account Number: 424461
Account Name: REAST Account
Description: Callsign / name

Please Tick One Box Family Membership Fee \$25.00 First Family Member then \$10.00 for each additional member
 Single Membership Fee: \$30.00 **Family Membership**

Please Print

1. Title.....Surname Preferred Name (s)..... Callsign.....

2. Title.....Surname Preferred Name (s) Callsign.....

3. Title.....Surname Preferred Name (s) Callsign.....

Telephone No. Email:

1. Member Number: 2. Member Number..... 3. Member Number.....

Postal Address Post Code

Are you a member or intend to be a member of the WIA National Organisation (Required for Insurance) YES /NO
Do you wish to be placed onto the REAST Inc. email mailing list? YES /NO
Do you wish to be placed on an emergency call list eg. To assist Tas Fire Service as a communications operator? YES /NO
Are you prepared to undertake training for this role (approximately one day annually)? YES /NO
Are you OK with your contact information being passed on to WICEN Tasmania (South) Inc. as the TFS contact organisation? YES /NO

I hereby apply for membership renewal of REAST (Inc) and agree to abide by the rules and articles of the association.

Signed: _____ Date: ___ / ___ / _____

Your application should include payment of the prescribed fee

Payment Method (Please tick Box)

Direct Deposit Cheque Money Order Cash

Receipt Number _____ Amount Received \$ _____ Date _____

When Paying by Direct Deposit, please place your Name or callsign in the Transfer Description area.