



# 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: \$25.00**       **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.