

### Membership Application Form

Email or Post completed form to:

**Membership Secretary, VicRoads Association Inc**

**Post:** PO Box 3217 Cotham Vic 3101 **Email Address:** [irisw25@bigpond.com](mailto:irisw25@bigpond.com)

**First Name** 
**Surname**

**Address**

**Postcode**

**Telephone Number** 
**Mobile Number**

**E-mail address** 
*Nominate an email address if you don't personally have your own*

**Emergency Contact Name**

**Emergency Contact Number**

### Employment in VicRoads and antecedent\previous organisations:

**Date From** 
**Until To**

**Organisation/s**

**Paid Direct Transfer.**  
 Your payment of **\$50.00** by electronic transfer should be made into the Association's NAB bank account, details as follow:

**VICROADS ASSOCIATION**  
**BSB 083-323**  
**ACC 170934017**

**Reference** - Please ensure that you **include your name in the "online" transaction details** so that the subscription can be attributed to you.

The information collected from members will be used solely for the purposes of managing the Association and its activities.

I agree to be bound by the Rules of the Association.

**Signed**

**Date**