



Christian Life Community

Australia

CHANGE OF DETAILS FORM

NB: One form per member. Please return to CLC, PO Box 5207, MANLY QLD 4179 or fax to (07) 3393 4483 or complete, scan and email to admin@clcaustralia.org.au

All CLC forms are available on the CLC web site at: www.clcaustralia.org.au

Date: _____

PREVIOUS DETAILS:

Title _____ First name _____ Surname _____

Postal Address _____

_____ Suburb _____ State _____ Postcode _____

Country if other than Australia _____

Home Address _____

_____ Suburb _____ State _____ Postcode _____

NEW DETAILS:

Title _____ First name _____ Surname _____

Postal Address _____

_____ Suburb _____ State _____ Postcode _____

Country if other than Australia _____

Home Address _____

_____ Suburb _____ State _____ Postcode _____

Work Address _____

_____ Suburb _____ State _____ Postcode _____

Phone/Email:

Mobile No/s _____

Phone No/s (home) (____) _____ (work) (____) _____

Email Addresses (please tick the email you would prefer to be used for contact):

(home) _____

(work) _____

continued over page

Please tick the address you would like to be your primary mailing address for correspondence:

Postal address Home address Work address E-mail

Group details:

Name of Group: _____

Name of Guide: _____

Other changes:

Thank you for letting us know your change of details. Please return this form to:

CLC Australia
PO Box 5207
MANLY QLD 4179

or FAX to: (07) 3393 4483

or scan as a pdf and email to admin@clcaustralia.org.au