



MEMBERSHIP APPLICATION

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

Date: _____

Title _____ First name _____ Surname _____ PN _____

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 (night) (____) _____ (day) (____) _____

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

(home) _____

(work) _____

Web site _____

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

Postal address Home address Work address E-mail

Date of Birth:

Occupation:

_____ / _____ / _____

Group details:

Name of Group: _____

Guide's Name: _____

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Which newsletters do you wish to receive?

- Annotations** (The CLC Australia newsletter, included with membership, is published quarterly, and will be sent to you via email. If you prefer to receive it by post, a \$5 fee is charged.)
- Projects** (Projects is a newsletter from Rome and is included with membership. It will be sent to you via email.)
- Progressio (printed version) \$40**
(A periodical which comes from the CLC Secretariat in Rome. It contains news, formation material, profiles, etc which members keep for future reference. All important CLC documents and material are published in Progressio. It is available free to view online on the CLC Rome web site (<http://www.cvx-clc.net/l-en/progressio.php>). You can purchase the printed version for \$40 per year.)
- I do not wish to receive any newsletters

Please select the type of membership you wish to have:

	\$	
<input type="checkbox"/> Single – Annual	1 payment of \$150	_____
<input type="checkbox"/> Single – Bi-annual	2 payments of \$75	_____
<input type="checkbox"/> Single – Quarterly	4 payments of \$37.50	_____
<input type="checkbox"/> Family	1 payment of \$250	_____
<i>Members covered by this payment</i>		

<input type="checkbox"/> Donation		_____
<input type="checkbox"/> Annotations by post	\$5	_____
<input type="checkbox"/> Annual subscription for Progressio (printed)	\$40	_____
<i>Must be received by 31 December for delivery the following year. Digital version is free.</i>		
TOTAL		\$ _____

PAYMENT DETAILS

On ___/___/___ I transferred \$ _____ into the Christian Life Community Inc account: BSB: 062-264 A/C No: 10084384

OR

I enclose a cheque/money order for \$ _____

OR

Please debit my Mastercard Visa

Amount: \$ _____ Card No:

Expiry Date: ___/___/___ Cardholder's Name: _____

Cardholder's Signature _____

Thank you for taking the time to complete this form. Please return it to:

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