

ACADEMY OF LIGHT INC. ABN 26 680 515 199

ASSOCIATION MEMBERSHIP APPLICATION 2017

DATE:

| | | | |
|--------------------------------|--|-------------------|-----|
| NAME (Print): | | Member No. | |
| No / STREET : | | | |
| CITY / STATE: | | POSTCODE: | |
| EMAIL : | | | |
| PHONES HOME/MOBILE: | | | |
| OCCUPATION (Optional) : | | | |
| Membership Fee: | Waived for 1Jul 2017 – 30Jun 2018 | Date Paid: | N/A |

Note all membership fees are due and payable in advance of 1 July of each year and are non refundable

I confirm that this completed new member application will be on file with Academy of Light Inc.

This application contains both the signature of the new member and the signature of an AOL Association Officer

APPLICANT'S SIGNATURE:

I acknowledge that my electronic signature, if used on this document is legally equivalent to my hand-written signature

**Return to : AOL – Secretary
Unit 14 / 39 Stanton Rd
MOSMAN NSW 2088**

For Office use only ...

Academy of Light Officer:

MEMBER NO:

Officer's Signature:

AOL Officer -- certifies that this individual has joined the AOL Association Inc and acknowledges that the electronic signature, if used, is legally equivalent to the hand-written signature.

Comments: