

KRR 98.7 FM

MEMBERSHIP FORM

SURNAME..... FIRST NAME.....

ADDRESS:

TOWN: POST CODE:

PHONE (Home): (Work):

E-MAIL ADDRESS.....

DECLARATION: I,.....wish to become a member of the Kandos Rylstone Community Radio Inc. I will read and comply with all Station Rules, Policies and CBAA code of practice.

Membership is Subject to being approved by the Management Committee under clause (3) of the KRR constitution .

SIGNED: DATE:

PAYMENT: Cash or EFT RECEIVED BY:

Bank Details:

Kandos Rylstone Community Radio Incorporated
BSB 032 657 Account No. 531 435

(For EFT payment please put your name in Reference section)

Membership Fees:

Adult: \$20; Concession Healthcare Card: \$10; Junior: \$10; Family: \$50 Per Year

Drop the membership form back to KRR FM & put in the slot of the office door or email the form back to krrfm@winsoft.net.au

MEMBERSHIP IS VALID WHEN YOUR RECEIPT IS ISSUED.

All Membership Renewals are due on 1st July of each year

KANDOS RYLSTONE COMMUNITY RADIO INC
PO BOX 99
KANDOS NSW 2848
PHONE: (02) 6379 4360
ABN: 99 602 347 393

