

# 2021 Membership Form

NEW	RENEW
-----	-------

Family Name	Given Name	Preferred Name

**BADGES:** Printed badge \$2    Magnetic badge \$10:    **YES/NO**    Please circle **relevant amount**

Male <input type="checkbox"/>	Female <input type="checkbox"/>	Age Group: For Grant Applications	50-65 <input type="checkbox"/>	66-75 <input type="checkbox"/>	76+ <input type="checkbox"/>	Special Needs    NO <input type="checkbox"/> YES <input type="checkbox"/> Details:
----------------------------------	------------------------------------	--------------------------------------	-----------------------------------	-----------------------------------	---------------------------------	---

**Email:** \_\_\_\_\_

**Chatterbox is our main form of communication – please check your email regularly!**

Phone:	Mobile:	Home:
--------	---------	-------

**Address:** \_\_\_\_\_

Suburb:	Postcode:
---------	-----------

Emergency Contact:	Name:	Phone:
--------------------	-------	--------

I wish to become a member of U3A Southern Gold Coast Inc. and agree to:

- abide by the rules and regulations of the organisation as set out in the Constitution, and the Code of Conduct (copies available from the Front Desk).
- assume full responsibility for my own health and well-being.

U3A Southern Gold Coast Inc. respects your right to information privacy. Information we collect and hold on our members is kept in accordance with information privacy laws. It is my responsibility to **refuse to participate in photos** if I do not want my image to be used.

**New Member?** How did you hear about U3A Southern Gold Coast? (please circle/specify)

Friend/family    Senior's magazine    Website    Other.....

Signature:	Date:
------------	-------

U3A Southern Gold Coast Inc. is a voluntary organisation and is totally reliant upon its volunteers. **Please advise below any skills and/or knowledge you would be willing to share** to assist in maintaining the operations of your organisation, e.g. Committee, Handyman, Office, Tutor.

**NB: U3A has Public Liability Insurance of \$20,000,000**

**Office Use Only:**    D/E – Database Entry    T = Tutor Advised

## MEMBERSHIP AND CLASS FEES

MEMBERSHIP	DATE	RECPT#	PAID	MBR#	D/E	New Member Pack given? Yes/No
------------	------	--------	------	------	-----	----------------------------------

DATE	RECEIPT#	PAID	T	D/E	DATE	RECEIPT #	PAID	T	D/E
					Ch'box				Folder:

<b>Fri</b>	AB1	<b>Apple iPhones etc – Beginner (Feb/Mar)</b>	<input type="checkbox"/>	<b>Wed</b>	LDW	<b>Line Dancing - Wednesday</b>	<input type="checkbox"/>
<b>Fri</b>	AI1	<b>Apple iPhones etc – Intermediate (April)</b>	<input type="checkbox"/>	<b>Fri</b>	MAJ	<b>Mahjong</b>	
<b>Mon</b>	ART	<b>Art</b>	<input type="checkbox"/>	<b>Thu</b>	MJJ	<b>Mahjong</b>	<input type="checkbox"/>
<b>Thu</b>	ARH	<b>Art History (Monthly)</b>	<input type="checkbox"/>	<b>Fri</b>	MED	<b>Meditation</b>	<input type="checkbox"/>
<b>Mon</b>	AWS	<b>Art Workshop</b>	<input type="checkbox"/>	<b>Thu</b>	MT1	<b>More Android Tablets &amp; Phones (March)</b>	<input type="checkbox"/>
<b>Wed</b>	BCL	<b>Book Club (1<sup>st</sup> &amp; 3<sup>rd</sup>)</b>	<input type="checkbox"/>	<b>Thu</b>	MTM	<b>Movement to Music</b>	<input type="checkbox"/>
<b>Thu</b>	BEX	<b>Brain Fun: Ageing Well (Monthly)</b>	<input type="checkbox"/>	<b>Sun</b>	MVS	<b>Movie Group FREE</b>	<input type="checkbox"/>
<b>Tue</b>	CAL	<b>Calligraphy</b>	<input type="checkbox"/>	<b>Wed</b>	PNB	<b>Pen &amp; Ink Beginners</b>	<input type="checkbox"/>
<b>Fri</b>	CBG	<b>Cards and Board Games</b>	<input type="checkbox"/>	<b>Wed</b>	PEN	<b>Pen &amp; Ink</b>	<input type="checkbox"/>
<b>Tue</b>	CSG	<b>Choir Singing</b>	<input type="checkbox"/>	<b>Mon</b>	PWT	<b>Psychology Discussion Group (FULL)</b>	<input type="checkbox"/>
<b>M-F</b>	COM	<b>Computer/IT <u>Individual</u> Class (6 weeks)</b>	<input type="checkbox"/>	<b>Mon</b>	QGM	<b>Qi Gong</b>	<input type="checkbox"/>
<b>Thu</b>	CAD	<b>Current Affairs Discussion</b>	<input type="checkbox"/>	<b>Mon</b>	SHQ	<b>Sew &amp; Knit Social Group (1<sup>st</sup> &amp; 3<sup>rd</sup>)</b>	<input type="checkbox"/>
<b>Tue</b>	DM1	<b>Dementia Prevention</b>	<input type="checkbox"/>	<b>Tue</b>	SFF	<b>Singing4Fun FREE</b>	<input type="checkbox"/>
<b>Mon</b>	FCM	<b>French Advanced - Carolyn</b>	<input type="checkbox"/>	<b>Tue</b>	SPB	<b>Spanish Beginners</b>	<input type="checkbox"/>
<b>Wed</b>	FCW	<b>French Advanced - Carolyn</b>	<input type="checkbox"/>	<b>Tue</b>	SPI	<b>Spanish Intermediate</b>	<input type="checkbox"/>
<b>Mon</b>	FIC	<b>French 1 - Carolyn</b>	<input type="checkbox"/>	<b>Wed</b>	SWD	<b>Spanish with Daniela</b>	<input type="checkbox"/>
<b>Tue</b>	FCB	<b>French 2 - Carolyn</b>	<input type="checkbox"/>	<b>Wed</b>	TTN	<b>Table Tennis</b>	<input type="checkbox"/>
<b>Tue</b>	FWJ	<b>French Intermediate - Jeff</b>	<input type="checkbox"/>	<b>Wed</b>	TC1	<b>Tai Chi</b>	<input type="checkbox"/>
<b>Tue</b>	FJC	<b>French Conversation - Jacqui</b>	<input type="checkbox"/>	<b>Wed</b>	TCA	<b>Tai Chi Beginners</b>	<input type="checkbox"/>
<b>Tue</b>	GER	<b>German</b>	<input type="checkbox"/>	<b>Thu</b>	T&T	<b>Tea &amp; Talk (Monthly)</b>	<input type="checkbox"/>
<b>Fri</b>	HDG	<b>History Discussion Group (Monthly)</b>	<input type="checkbox"/>	<b>Thu</b>	TOP	<b>Topical Issues</b>	<input type="checkbox"/>
<b>Thu</b>	HOW	<b>How Are We To Live? (Monthly)</b>	<input type="checkbox"/>	<b>Tue</b>	TVT	<b>Travel Social Group (1<sup>st</sup> &amp; 3<sup>rd</sup>)</b>	<input type="checkbox"/>
<b>Mon</b>	HOE	<b>How on Earth Did We Get Here?</b>	<input type="checkbox"/>	<b>Thu</b>	TVA	<b>Trivia (Monthly)</b>	<input type="checkbox"/>
<b>Thu</b>	HUM	<b>The Human Enigma (Monthly)</b>	<input type="checkbox"/>	<b>Mon</b>	UKB	<b>Ukulele Beginners</b>	<input type="checkbox"/>
<b>Thu</b>	IT1	<b>Intro Android Tablets &amp; Phones (Feb)</b>	<input type="checkbox"/>	<b>Mon</b>	UKE	<b>Ukulele</b>	<input type="checkbox"/>
<b>Wed</b>	ITB	<b>Italian for Beginners</b>	<input type="checkbox"/>	<b>Fri</b>	WAD	<b>Walk &amp; Discover (Monthly)</b>	<input type="checkbox"/>
<b>Thu</b>	ITN	<b>Italian Intermediate</b>	<input type="checkbox"/>	<b>Tue</b>	WSS	<b>Women in Sacred Story</b>	<input type="checkbox"/>
<b>Mon</b>	LAU	<b>Laughter Yoga</b>	<input type="checkbox"/>	<b>Thu</b>	WFH	<b>Write Family History (Monthly)</b>	<input type="checkbox"/>
<b>Thu</b>	LIL	<b>Leap Into Literature (Monthly)</b>	<input type="checkbox"/>	<b>Tue</b>	YO1	<b>Yoga Tuesday</b>	<input type="checkbox"/>
<b>Tue</b>	LEX	<b>Light Exercise</b>	<input type="checkbox"/>	<b>Thu</b>	YO2	<b>Yoga Thursday</b>	<input type="checkbox"/>
<b>Mon</b>	LDM	<b>Line Dancing - Monday</b>	<input type="checkbox"/>	<b>Wed</b>	YYH	<b>You &amp; Your Health (Monthly)</b>	<input type="checkbox"/>