



# Membership Renewal

Tribe FM Incorporated

6 Railway Terrace Willunga SA 5172  
PO Box 810 Willunga SA 5172  
Ph: (08) 8528 9919  
[tribefm@tribefm.org.au](mailto:tribefm@tribefm.org.au)  
[tribefm.org.au](http://tribefm.org.au)

We need to make sure your contact details are up to date each year

## Be involved and support Onkaparinga's Community Radio Station giving your local community a voice

Please tick the applicable box, complete your details and choose a payment method (see below)

### MEMBERSHIP TYPES and FEES:

- PERSONAL MEMBERSHIP  **\$48 per annum** No Pro-rata Fees applicable.
- COUPLE MEMBERSHIP  **\$54 per annum**
- FAMILY MEMBERSHIP  **\$60 per annum** Concession Holders 50% off.
- CONCESSION  **50% off above**
- CONCESSION CARD NUMBER(s): (if claimed)

CORPORATE MEMBERSHIP  **\$240 per annum**

**Note: Each membership carries one vote.**

Payable on and renewable at the end of every financial year (June 30) Annual Membership fee has no GST.

Fee equals \_\_\_\_\_ (Annual Fee) \*, then /2 if concession. \$ \_\_\_\_\_

**EFT Details: Account Name: Tribe FM Inc, BSB: 633 000, Account Number: 135 369 627**

With your last name, initial as the reference. for example **Smith J**

**MEMBER DETAILS: Must be filled in DO NOT put "as before", we need to confirm all details for the SGM**

**NAME:** Primary Member (Couple / Family) / Corporate Name **DOB:**

**NAME:** Associated Member (Couple / Family) / Corporate Contact Name **DOB:**

**NAME:** Associated Member Under 18 **DOB:**

**NAME:** Associated Member Under 18 **DOB:**

**RESIDENTIAL SUBURB:** **STATE** **POSTCODE**

**POSTAL ADDRESS:** if different from above.

**POSTAL SUBURB:** **STATE** **POSTCODE**

**TELEPHONE: HOME** **MOBILE:**

**EMAIL ADDRESS:**

**MAILCHIMP NEWSLETTER**  **YES** OR  **NO**

I apply to renew as a member of Tribe FM Incorporated, with fees paid in advance. I hereby continue to agree to abide by the Constitution and the Rules of this Association and its revisions. I am over 18 years of age.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ /20\_\_\_\_\_

**OFFICE USE ONLY**

Original Join Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date Records Updated: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\*\* Form to be sent to [secretary@tribefm.org.au](mailto:secretary@tribefm.org.au) or PO Box 810 Willunga SA 5172

Existing Member