



VIEW Clubs of Australia Membership Movements Form

Please print clearly and use correct spelling. This information is used to update the VIEW Member Database.

Club: _____ Secretary: _____ Date: _____

RESIGNING MEMBERS

Use this section to notify National Office of member resignations.

		Ill Health	Reason Moving	Other
Member Name: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date: _____	If Other, please state reason: _____			
Member Name: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date: _____	If Other, please state reason: _____			
Member Name: _____		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date: _____	If Other, please state reason: _____			

REJOINING MEMBERS

Use this section to register members who are re-joining VIEW.

	Under 12 Months	Over 12 Months	Badge required
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remember after 12 months absence members have to rejoin as new members (badge optional). Please attach membership Joining fee with this form – if required

Deceased Members

Use this section to notify National Office of member deaths.

Member Name:	Date
_____	_____
_____	_____
_____	_____
_____	_____

Privacy Statement: Information given is kept private and confidential and may only be used within VIEW Clubs of Australia and shall not be used for any other purpose.

Return form to: VIEW Clubs of Australia, GPO Box 10500, Sydney, NSW 2001

Email: view@thesmithfamily.com.au Web: view.org.au