



**APPLICATION FOR AUSTRALIAN SEABIRD & TURTLE RESCUE INC.**  
**MEMBERSHIP/RENEWAL**

**CENTRAL COAST BRANCH**

NAME OF APPLICANT (*Principal member*).....

PHONE HOME.....WORK.....MOBILE.....

ADDRESS.....

POST CODE.....EMAIL.....

YES – Please send me notice of upcoming courses and events

NO – I do not want to receive emails from ASR

**MEMBERSHIP CATEGORIES**

ASR has two categories of general membership: **New members will initially join the Association as an Ordinary Member**

**ORDINARY MEMBER:** is entitled to vote and participate in the affairs of the Association but is not entitled to be directly involved in the rescue and/or care of wildlife.

**LICENCED MEMBER:** is entitled to vote and participate in the affairs of the Association and be directly involved in the rescue and/or care of wildlife after a program of training and competency assessment. All requirements and policies related to licenced members are available on the ASR website. **I understand that I will not be licensed to rescue and/or care directly for wildlife until I have undertaken appropriate training by the Association, which has been approved and signed off by the General Manager or Branch Coordinator.**

SIGNATURE OF APPLICANT.....DATE.....

NAME OF ADDITIONAL FAMILY MEMBER.....SIGNATURE.....DATE.....  
(Print) (Over 18 years of age)

NAME OF ADDITIONAL FAMILY MEMBER.....SIGNATURE.....DATE.....  
(Print) (Over 18 years of age)

**SELECT YOUR PAYMENT OPTION - Membership is based on the financial year (1<sup>st</sup> July – 30<sup>th</sup> June every year)**

**ANNUAL MEMBERSHIP FEE**

One (1) YEAR MEMBERSHIP - \$30.00

Three (3) YEAR MEMBERSHIP - \$75.00

One (1) YEAR ADDITIONAL FAMILY MEMBER - \$10.00 PP

Three (3) YEAR ADDITIONAL MEMBERS - \$25.00 PP

TOTAL MEMBERSHIP FEE \$..... I WISH TO MAKE A DONATION OF \$.....

TOTAL PAYMENT \$..... BANK RECEIPT NUMBER .....

**DIRECT DEBIT:** Australian Seabird Rescue Inc, Westpac BSB 032-629 A/C 203039 Please forward us your receipt information to [admin@seabirdrescue.org.au](mailto:admin@seabirdrescue.org.au) and we'll be in touch shortly. *Please note – tax deductible donations will receive a receipt by request*

For further information please phone our office – 02 6686 2852 Email – [admin@seabirdrescue.org.au](mailto:admin@seabirdrescue.org.au)

**Please email or post any membership forms to: [admin@seabirdrescue.org](mailto:admin@seabirdrescue.org),  
Australian Seabird Rescue Inc, 264 North Creek Rd, Ballina NSW 2478  
or your local coordinator, [asrcentralcoast@gmail.com](mailto:asrcentralcoast@gmail.com)**

**OFFICE USE ONLY**

New member approved by committee: **Y / N** Date.....

Fees Paid by - CASH/CHEQUE/MONEY ORDER/ ONLINE BANKING Date.....



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(Please circle)

Receipt No.....

Applicant informed/ Receipt & information posted/emailed:

Date.....

Entered in Membership Register By.....

Date.....