

# City of Toowoomba Eisteddfod Inc.

ABN 59 244 779 276

PO Box 60, Toowoomba, QLD, 4350.

Email: [toowoombaeisteddfod@gmail.com](mailto:toowoombaeisteddfod@gmail.com)  
[www.toowoombaeisteddfod.org.au](http://www.toowoombaeisteddfod.org.au)  
Mobile 0427 709 094

## Membership Application or Renewal

(Financial Period 1<sup>st</sup> October to 30<sup>th</sup> September each year)

I wish to      renew      join my membership of the City of Toowoomba Eisteddfod Inc.  
for the year \_\_\_\_\_ to \_\_\_\_\_ as an

Ordinary Member \*       Professional Member ^

Title

Full Name

Address

Home Phone

Mobile Phone

Work Phone

Email Address

Membership fee

by

Direct Deposit Reference Number

Signature of Applicant

Date

### **Additional Information required from NEW members only -**

**New members must be nominated and seconded by current members of the Eisteddfod Association.**

Nominated by:

Date:

Signature:

Seconded by:

Date:

Signature:

OFFICE USE ONLY:

Secretary: Recorded in  
databases/email groups (Please  
list below)

Treasurer: Receipt/vouchers  
issued:

New Membership Accepted:  Professional Membership  
 Ordinary Membership

2\_\_\_ Membership Number: