



# Membership Form 2018-19

☐ (03) 9698 7200 ☐ admin@auscricket.com.au ☐ www.auscricket.com.au

## Membership Categories

I wish to become a member of the Australian Cricketers' Association Inc. (ACA) for Season 2018-19 (please tick where appropriate)

### 1 Please select your membership type:

- Life Membership (\$700)  
 Annual Membership (\$50)

### 2 Please select your payment type:

- Life Membership Payment Plan (Life membership \$700 paid in six monthly instalments)  
 Credit Card (Please fill in details below)

## Personal Details

\*Full Name: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please tick this box if you authorize the ACA whilst you are an ACA member, to pass on those details marked with \* to Cricket Australia / State Associations to assist their communications with you

State/s Represented: (please tick)  NSW  QLD  SA  TAS  VIC  WA  ACT

## Payment

Credit Card (Fill in details below) **OR**  Cheque/Money order (enclosed)

Visa  Mastercard  Amex

Cardholder's Name: \_\_\_\_\_ Card Number: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Expiry Date: \_\_\_\_ / \_\_\_\_

## Return

Please return this completed form to [admin@auscricket.com.au](mailto:admin@auscricket.com.au)

Thank you for your support of the ACA. For any questions relating to membership please contact the ACA 03 9698 7200

It is a condition of membership of the ACA that you agree to grant the ACA the authority to agree or approve the use of attributes in accordance with the terms of the ACA's Constitution