



# GOLD COAST LAPIDARY CLUB Inc.

80 Pacific Avenue, Miami

07 55261190

## Membership Application

Date of Application ..... Amount Paid \$..... Receipt No .....

Membership fee = joining fee + pro rata payment of full year fees + name badge  
Club Newsletter "Snippets" will be emailed – but can be sent by Australia Post for a cost of \$10.00 for 12 months.

Type of membership: - **Full** / **Associate** / **Junior\*** (Please circle as necessary)

\* Minimum age of members is 12 years; 12 to 16 year olds' parent or guardian must be at least an associate member and must accompany the Junior Member on all occasions.

Full Name ..... D.O.B ...../...../.....  
(for insurance purposes)

Preferred Name on Badge.....

Address .....

..... P/C .....

Telephone..... Mobile.....

E-Mail.....

Occupation/Skill/or Previous Occupation (Please don't put retired) .....

Signature of applicant ..... (If junior Parent or Guardian).....

### Please Note

**Suitable covered footwear must be worn at all times.**

New members are expected to attend a Gold Coast Lapidary Club General Meeting for their induction into the Club. General Meeting are held in the club rooms on the third Tuesday of the month at 7.30pm.

If you do not have transport or cannot drive at night, suitable transport may be arranged.  
Do you require transport, please circle Yes or No

As the Gold Coast Lapidary Club Inc is a totally volunteer run organisation all members are expected to contribute to the cleaning and maintenance of the club. New member's responsibilities will be outlined after initial training.

Upon signing of this form you agree to the conditions of membership as set out above. Your membership is conditional upon acceptance by the club committee at their monthly meeting.

I agree to the conditions outlined above Signature: .....Date:.....

For office use only			
Received by.....	Banked.....	Badge Ordered.....	Membership No. ....
Card Printed.....	Data entered: to membership list ..... to email list .....		