

## INDIVIDUAL MEMBERSHIP APPLICATION / CHANGE OF DETAILS

### APPLICATION FOR

New member ☐

Change of details ☐

Member N<sup>o</sup> (if applicable)

### MEMBERSHIP TYPE

Individual ☐

Family ☐

### MEMBERSHIP FEE

Individual **\$30**

Family **\$40**

*Annual membership runs from 1 July to 30 June.  
Membership fee is **\$20** if joining after December of the  
current financial year.*

### MEMBER DETAILS

Name  DOB

Address

Suburb  State  PCode

Email  Mobile #

### WHO REFERRED YOU TO Hear With Us

### WHY ARE YOU JOINING Hear With Us

### WHAT CAN YOU OFFER Hear With Us (skills etc)

### PAYMENT OPTIONS *(please tick one option)*

Cash ☐

EFT ☐

Account Name Hear With Us  
Bank Bank of Queensland  
BSB No 124-001  
Account No 23317540  
Reference First and Surname



**Signed:**

**Date:**

Please complete on line, or download and return the form to [captionsmatter@hearwithus.com.au](mailto:captionsmatter@hearwithus.com.au) or post to  
Hear With Us, PO Box 5095, KENMORE EAST QLD 4069