





## THE ROTARY FOUNDATION DISTRICT 9820 CENTURION CLUB APPLICATION FORM

Yes I would like to join/renew membership to the District 9820 Centurion Club. (Delete as appropriate)

First Name	Last Name
Home Address	
Suburb	State Post code
Home Phone	Work phone Mobile
e-mail address	
Rotary Club of	Club ID number
My RI member ID	(Available from your club secretary)
Donations of over \$2.00 are tax deductible - see direct debit agreement overleaf  NEW member contribution  Please send me a certificate  ONGOING member contribution  No	
PAYMENT BY CHEQUE/CASH  Amount in Australian currency \$  Please make cheque payable to the Australian Rotary Foundation Trust	
PAYMENT BY CREDIT CA	
Amount in Australi	an currency \$
Mastercard	Visa CVV – 3 Nos on back EXPIRY DATE /
Card Number	
Name on card	
Frequency of	In the month of for
payment	Once only Monthly Quarterly Half yearly yearly
Signatu	e Date
PAYMENT BY DIRECT D	
By signing this document I/we authorise THE AUSTRALIAN ROTARY FOUNDATION TRUST with ABN 55 218 421 934 and the Debit User Number 352263 the Debit User, to debit my/our account detailed in the schedule below, through the Direct Debit System (details below. I/we must pay you when due under the arrangement between us. This authority is to remain in force until further notice.  Amount in Australian currency  \$	
BSB	Account Number
Name on Account	
Name of Financial	nstitution
Frequency of	In the month of for
payment	Once only Monthly Quarterly Half yearly yearly
Signatu	Pe Date
Please send completed form with your cheque or payment details (including if using Direct Debit) to:  PP Sam Graham Centurion Co-ordinator, 9 Quail Court Carrum Downs Vic 3201  For office use only  Received Receipt Number Entered S/S Entered D/base	