

# Alliance Française de Cairns

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

## MEMBERSHIP CATEGORIES *(please tick):*

- |   |      |   |      |
|---|------|---|------|
| <input type="checkbox"/> Single                 | \$30 | <input type="checkbox"/> Students:              | \$25 |
|   |      | Including students of the Alliance Française    |      |
| <input type="checkbox"/> Concession:            | \$25 | <input type="checkbox"/> Concession (2 people): | \$40 |
| <input type="checkbox"/> Family (2 to 4 people) | \$50 |   |      |

Please add all other names to be covered by the Family Card or Concession (2 people) Card:

\_\_\_\_\_

**Note:** membership is compulsory for all students of the Alliance Française.  
All prices include GST

**AMOUNT ENCLOSED: \$** \_\_\_\_\_

Tax Invoice available upon request – Membership Card will be sent by mail.

## METHOD OF PAYMENT *(please tick):*

- Cash                       Cheque (to Alliance Française de Cairns)
- Direct Deposit into our account:

**Account Name:** Alliance Française de Cairns Inc

**Account Number:** 034167 377200

Please ensure you indicate your full name when making a deposit so we can identify your payment. Please include proof of your transfer with this Application Form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Alliance Française de Cairns

**Postal Address:** 18 Sarina Close – Kewarra Beach QLD 4879

**Tel:** 0488 765 550

**Email:** [joinus@afcairns.org.au](mailto:joinus@afcairns.org.au)

[www.afcairns.org.au](http://www.afcairns.org.au)

