

# NEW MEMBER'S APPLICATION FORM

SINGLE PARENT FAMILY ASSOCIATION INC.  
P.O. Box 906, Baulkham Hills, N.S.W. 1755

MEMBERSHIP FEE IS \$40.00 PER ANNUM - PLUS \$5.00 JOINING OR RE-JOINING FEE

| TITLE | FIRST NAMES | SURNAME |
|-------|-------------|---------|
|       |             |         |

| RESIDENTIAL ADDRESS | POSTAL ADDRESS |
|---------------------|----------------|
| Suburb NSW          | Suburb NSW     |

| HOME NUMBER                  | MOBILE | WORK NUMBER | DATE OF BIRTH |
|------------------------------|--------|-------------|---------------|
| Tick box if number is silent |        |             |               |

| OCCUPATION | EMAIL ADDRESS |
|------------|---------------|
|            |               |

| PLEASE GIVE NAME, SEX AND DATE OF BIRTH OF YOUR CHILD/REN |            |         |     |               |
|---|------------|---------|-----|---------------|
|   | FIRST NAME | SURNAME | M/F | DATE OF BIRTH |
| 1   |            |         |     |               |
| 2   |            |         |     |               |
| 3   |            |         |     |               |
| 4   |            |         |     |               |

IF YOUR EX-SPOUSE IS A MEMBER OF Single with Children, THEN YOU WILL NEED HIS/HER PERMISSION TO JOIN.  
PLEASE COMPLETE BELOW.

| (EX) SPOUSE'S NAME | (EX) SPOUSE'S SIGNATURE | MEMBERSHIP NUMBER |
|--------------------|-------------------------|-------------------|
|                    |                         |                   |

## Privacy

The Single Parent Family Association understands and respects your privacy. Personal information provided by you will be used for administrative purposes only. For a full explanation of our Privacy Policy, please refer to the website:

<http://www.singlewithchildren.com.au/SPFA-Privacy.shtml>

| APPLICANT'S SIGNATURE | DATE |
|-----------------------|------|
|                       |      |

*Please allow 4-6 weeks for processing. You can attend the functions before your application is processed.*

-----OFFICE USE ONLY-----

| DATE PROCESSED | PAYMENT DETAILS | MEMBERSHIP NUMBER |
|----------------|-----------------|-------------------|
|                |                 |                   |