



**Australian Underwater Federation Qld. Inc.  
CLUB MEMBERSHIP FORM  
2010/2011**



Club Name: \_\_\_\_\_ Tel: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_ email: \_\_\_\_\_

**Club Office Bearers Details**

Position	Name	Tel	Mobile	Email - PLEASE PRINT
<b>COMMISSION</b>	<b>FULL CLUB MEMBERSHIP \$50.00</b> Discounted Membership if Paid by <b>31 August \$30.00</b>	<b>AFFILIATED CLUB MEMBERSHIP \$50.00</b> Discounted Membership if Paid by 31 <sup>st</sup> August <b>\$30.00.</b> <b>Please attach list of club member with form &amp; Payment</b>		<b>TOTAL</b>
Spearfishing	\$	\$	\$	
Underwater Hockey	\$	\$	\$	
Recreational Diving	\$	\$	\$	
Finswimming	\$	\$	\$	

**INCORPORATED - YES/NO    UNINCORPORATED CLUBS MUST COMPLETE CLAUSE BELOW:-**

**REPRESENTATIVE MEMBERSHIP POSITION**

The Representative that is nominated and signs the Representative Membership Position will be the representative for the club's dealings with the AUFQ. **(NB:-** Please refer to 4.1 of the AUFQ constitution.

**Club Name:-**.....nominate .....**(name of representative)**  
**as our Representative Membership Position.**

**Signed:-**..... **Dated:-**.....

(by above named representative)