

APPLICATION FOR AFFILIATION WITH GCA

TAX INVOICE
Issued January
each year

Privacy Statement: The GCA Inc. respects the privacy of all its members. No personal details of individual members will be used for any purpose other than that for which they are held i.e., the operation of the organization. No person's personal details will be provided to any other party without express approval of that individual unless required by law. By applying for membership, the affiliate executive (president, Secretary, Treasurer) consent to provide such details as their name and address.

CLUB NAME: _____

CLUB'S REGISTERED INCORPORATION NUMBER: _____

Has it been necessary for your Club/Society to make an Insurance Claim? Yes/No (If yes, please attach details)

Do you intend seeking Insurance Cover through GCA? Yes/No (If yes, please see note at bottom of this Form)

Do you operate a Community Garden? Yes/No (If yes, please complete the Declaration below)

We support the aims of the Garden Clubs of Australia Inc. and in the event of admission as a new member, we agree to be bound by the rules of Garden Clubs of Australia Inc, for the time being in force and hereby apply to become an affiliate.

President's Signature: _____ Secretary's Signature: _____

Date: _____ No. of Members: _____

(Total fee-paying membership including Junior Members)

Joining Fee (GST included) (a) \$ 55.00

Affiliation Fee for 12 Months commencing 1 January each year (GST included) (b) \$ 80.00

*Magazine *Our Gardens* @ \$15.00 per year (4 issues) _____ copies @ \$15.00 (c) \$ _____

Total (a) + (b) + (c) \$ _____

***It is suggested that at least three subscriptions be taken for circulation within your committee.**

Many clubs factor the cost of an Annual Magazine Subscription for *Our Gardens* into their own Annual Fees. Clubs that do not do this are requested to encourage as many of their members as possible to subscribe at a reduced rate. The annual subscription for bulk delivery to your club's postal address is now \$15 (incl. GST) for four (4) seasonal issues. We also have an alternative scheme whereby members can order through their club secretary and have the magazine delivered to their home address in a waterproof envelope for the same low price \$15 (incl. GST). This offer relieves secretaries of the onerous task of distributing magazines. The magazine is issued quarterly - February, May, August and November.

Payment by Direct Deposit/Cheque/Money Order to: The Garden Clubs of Australia Inc

Direct Deposit to GCA: BSB: 062 000 Account No: 0092 2899

(Please use Club name as Reference and attach a copy of the Remittance to this Form)

Please send completed Form A with your payment or remittance advice to: GCA Membership Secretary, 27 Westmoreland Drive, LEEMING WA 6149 or Email to: membership@gardenclubs.org.au

PTO...→

Prepared by:	Shirley Haslam	Document Status:	Final
		Review Date:	31/07/23
Approved by:	Jacqui Bateman	Approver's Signature:	JEB

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Issue Date:	12/12/22
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To avoid misinterpretation please print clearly.

CLUB CONTACT: _____ PHONE: _____

CLUB'S POSTAL ADDRESS: _____
_____ POST CODE: _____

CLUB'S EMAIL: _____ CLUB'S WEBSITE: _____

Option: I agree to this phone number _____ being listed as a contact number for the Club on the GCA Website - [Locate a Club – Garden Clubs of Australia](#)

SIGNED: _____ (President/Secretary/Treasurer)

SECRETARY: _____ PHONE: _____

Postal Address: _____ Post Code: _____

PRESIDENT: _____ PHONE: _____

Postal Address: _____ Post Code: _____

TREASURER: _____ PHONE: _____

Postal Address: _____ Post Code: _____

Date Club Formed: _____ Month of AGM: _____

MEETING DAY AND TIME: (e.g. 1st Wednesday 2pm) _____ (Will appear on the GCA Website)

DOES YOUR CLUB HOLD GARDEN/FLOWER SHOWS? If so, what kind and when: _____

If your organisation produces a Journal/Newsletter please send a copy to the GCA Editor -

Email: editor@gardenclubs.org.au

PRINCIPAL ACTIVITIES AND INTERESTS OF YOUR CLUB: _____

For Office use only				
Receipt Number: _____	Date: _____	GCA List Number: _____		
	Amount	GST	Total	
Joining Fee	_____	_____	_____	
Affiliation Fee	_____	_____	_____	ZONE: _____
Magazines	_____	_____	_____	
Total	_____	_____	_____	Direct Debit Form Provided Y/N _____
	Database	<input type="checkbox"/> Amend	<input type="checkbox"/> Club List	<input type="checkbox"/> Web <input type="checkbox"/>

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