



MEMBERSHIP APPLICATION FORM
MCC LONG ROOM WINE AND FOOD SOCIETY INC. A0120104Y
ABN 43 989 272 248

Title: First name: Surname:

Email: Phone:

Address:

Suburb: State: Post Code:

I declare that I am a financial member of the MCC. My member number is:

(4 to 6 digits)

MCC Membership category: Provisional Restricted Full 50-Year

I agree to be bound by the rules of the MCC Long Room Wine and Food Society.

Signature:

Electronic signature accepted

This form must be accompanied by the application fee of \$200.00 including GST.

Please charge my: Visa Mastercard American Express

Card number: Expiry: CVV:

Cardholder's Name:

Please return to: Mr Ian J. Maguire Date received:

Honorary Secretary

PO Box 179

LEONGATHA VIC 3953

0438 043 027

(Office use only)

Or email to: secretary@mcclrwfs.com.au

As the membership quota has been filled and there is a large waiting list, it will be a substantial time before you can expect to be offered membership to the society.

Upon payment of the amount due, this document becomes a tax invoice.