

# 2016 OZ HPV APPLICATION FOR MEMBERSHIP

PLEASE TICK ONE OF THE FOLLOWING

NEW MEMBER

RENEWAL

NAME				
ADDRESS				
CITY		STATE		PCODE
PHONE	HOME		WORK	
EMAIL				
I agree to abide by the rules of association of Oz HPV Incorporated				
SIGNED		DATED		

**DETAILS OF HPV (S): Please attach a list if this space is not big enough.**

NAME	
MAKER	
TYPE OF HPV	
ANY OTHER DETAILS?	

**MY INTERESTS ARE:**

PLEASE TICK ONE OR MORE OF THE FOLLOWING

- |   |  |
|---|--|
| <input type="checkbox"/> Competitions                                     | <input type="checkbox"/> Helping with Events         |
| <input type="checkbox"/> Building HPV's                                   | <input type="checkbox"/> Organising rides in my area |
| <input type="checkbox"/> Social Rides                                     | <input type="checkbox"/> Contact with others         |
| <input type="checkbox"/> Contributing articles to HUFF and/or the website |  |

**ALL OZHPV NEWSLETTERS WILL BE DISTRIBUTED VIA EMAIL.**

**IF YOU WANT TO RECEIVE HUFF VIA SNAIL MAIL PLEASE ADD \$15.00 TO YOUR ANNUAL MEMBERSHIP FEE.**

I WANT TO RECEIVE MY HUFF BY SNAIL MAIL       YES (+ \$15)

**You can direct deposit your membership fees into Oz HPV's bank account.  
NAB BSB: 082-902 Account Number: 686382698 Account Name:  
Oz HPV Inc**

Alternatively Send this completed application form with your cheque or money order to:

Secretary/Membership Officer	Membership fees	
Richard Ferris	Single	\$25.00
Oz HPV Incorporated	Family	\$35.00
4/150 Clarke Street	International Single	\$25.00
Howlong NSW 2643	International Family	\$35.00

I HAVE MADE A DIRECT DEPOSIT ON \_\_\_\_\_ (insert date here)

Send filled in forms via email to: [secretary@ozhpv.org.au](mailto:secretary@ozhpv.org.au)