



NSW Justices

NSW Justices Association Inc.

ABN 63 383 537 397

PO Box 92 Concord NSW 2137

Ph: 02 9736 2255 Fax: 02 9743 3084

E: nswja@nswja.org.au W: www.nswja.org.au

MEMBERSHIP APPLICATION FORM – NEW MEMBERS only CONFIDENTIAL

NAME (Mr/Mrs/Miss/Ms/Dr): _____
(Please circle) Surname Given Names Preferred Name

RESIDENTIAL ADDRESS: _____ **POST CODE:** _____

POSTAL ADDRESS: _____ **POST CODE:** _____
(if different from residential address)

PHONE (Home): _____ (Mobile): _____ (Work): _____

EMAIL: _____ **DATE OF BIRTH:** ____/____/____
(Insurance requirement)

JP REGISTRATION. NO: _____ **DATE RE/APPOINTED:** ____/____/____ **SENIORS/CONC. CARD NO:** _____

Your membership will be automatically attached to the closest branch or support group, or you may nominate your preferred branch or support group: _____

Would you be interested in volunteering on our Community JP Desks? **Yes / No**

If a current member of the NSWJA referred you, please provide their name: _____

SCHEDULE OF FEES

Membership Categories	1 Year (includes \$25 joining fee)	3 Years (no joining fee payable)
Full Member	\$65 + \$25 = \$90	\$174
Senior's Card Holder	\$57 + \$25 = \$82	\$155
Concession Card Holder/Retired	\$40 + \$25 = \$65	\$108

PAYMENT METHOD: I enclose **cheque / money order** payable to 'NSW Justices Association Inc.'

OR

Direct Deposit: **BSB:** 062 145 **Account No.** 1017 9307

OR

Please charge my: Visa MasterCard **Card No:** _____/_____/_____/_____

Name on Card: _____ **Expiry Date:** ____/____/____

Amount (please refer to Schedule above): \$_____

AGREEMENT: I have been duly appointed and sworn in as a Justice of the Peace in and for the State of New South Wales, Australia, and hereby make application to be admitted as a member of the NSW Justices Association Inc. and, if accepted, agree to abide by the Constitution and Standard Operating Procedures of the Association.

SIGNATURE: _____ **DATE:** _____

Privacy: Your privacy is important to us. Rest assured we will not disclose your personal information to any external party. Your contact information may be used by the Association for updates and mail outs from the Admin Centre or branches to keep you informed.

PLEASE FORWARD THIS FORM WITH YOUR PAYMENT TO THE ADMINISTRATION CENTRE (DETAILS ABOVE).