



**National Servicemen's Association of Australia
(Queensland) Inc.**

ABN 87 625 176 937

President

A. GARLIN

Secretary

L. MATTHEWS

Email officeadmin@nashoqld.org.au

Please Address all Correspondence to

P.O. Box 7014

Holland Park East Qld 4121

Phone: 07 3324 1277

Complementary Membership

New Application	Year of Application
Renewal	Renewal Year

Complementary Membership must be renewed each Calendar Year.

Surname:	Post Nominals:	Name to be shown on Membership Card:
Given Names:		
Residential Street:		
Residential Suburb:	Residential Postcode:	
Postal Street (If different from above)		
Postal Suburb (If different from above)	Postal Postcode (If different from above)	
Email Address		
Phone:	Reason for Complementary Membership:	
Name of Branch making Application:	Year for Complementary Membership:	

I make application for complementary membership on behalf of our Branch

Signature Branch Secretary or Branch President

Date

Please Forward Completed Form to

National Servicemen's Association of Australia (Queensland) Inc.

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Holland Park East Qld 4121

Office Use Only:

Date Received:	Month Nominated at SMC:	Entered on Computer by:	Membership Number: