

Camden Historical Society Inc.

ABN84 182 869 026

## Membership Application / Renewal for 2024-2025

Please PRINT your details clearly below and tick as required.

I wish to **commence**  **renew**  my membership to the Camden Historical Society Incorporated.

**Date** .....

**Name** .....

**Address**.....

.....**Post Code**.....

**Contact Phone No.** .....

**Email** .....

**Signature** .....

If you provide your email address the Society can notify you of upcoming events, meetings and guest speakers and keep you advised of Society matters. We can provide you with our newsletter electronically to read.

*Camden Historical Society Incorporated recognises the importance of protecting your privacy. We will only use the information provided to directly communicate with you. Information provided through this Application for Membership form is used only by the Camden Historical Society Incorporated and is not used, sold or given to any third parties.*

**Membership Type**  Individual \$ 20     Couple and families \$ 25     Donation \$ .....

All membership fees are inclusive of GST. Donations above \$2 to the Camden Historical Society Inc. are Tax Deductable. An official Tax Receipt will be issued upon payment of fees and any donation provided.

Membership entitles you to participate in the affairs of the Camden Historical Society Inc. You will also receive a twice yearly edition of the Society's Journal *Camden History* by post and Society Newsletters either via email or post. Your membership and any donation provided assists the Society in protecting the history and heritage of the Camden district, mainly through the operation of the Camden Museum.

### Volunteering with the Society

Are you a current Volunteer with the Society  Yes  No

If Yes please mark your age group for our Volunteer Insurance requirements

under 18 yrs     18 to 50 yrs     51 to 70 yrs     71 yrs to 85 yrs     Over 85 yrs

If No, would you like to hear how you can play a volunteering role with the Society  Yes  No

If Yes, our Volunteer Coordinator will contact you to discuss the opportunities to Volunteer.

Please return your Membership Application/Renewal form with payment to:

The Secretary    Camden Historical Society

PO Box 566 Camden NSW 2570    Or present it at the Camden Museum when it is operating.

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Date ..... Receipt Number .....

Amount Received \$ ..... Cash/Cheque                      Database updated .....