

| | ER APPLICATION | RENEWAL | Date: | | | | |
|---|---|-----------------------|-----------|--------|-----------------|--|--|
| Family Name: | | Preferred First Name: | | | | | |
| Residential No. & stree | et: | | Postcode: | | | | |
| Address Town: | | | State: | State: | | | |
| Phone Numbers Home: Mobile: | | | | | | | |
| E-mail: | | | | | | | |
| Membership Fees: Fees below apply from 1 July to 30 June annually | | | | | | | |
| □ Single | | | | | Payment made | | |
| □ Single Concession (Pensioner, Concession and Student Concession Card Holders | | | | | | | |
| Family (Two adults living at same address) | | | | | \$ | | |
| □ Family Concession (Two adult Pensioner or Concession Card Holders living at same address) | | | | | | | |
| □ Students to age 16 | | | | | | | |
| Payment: Membership fees can be paid by one of the following methods | | | | | | | |
| In person, cash or chequ | e At Maitland and Beyond Family History, The Barracks, 17 Lindesay St, East Maitland | | | | | | |
| By cheque | To Maitland and Beyond Family History PO Box 247 Maitland NSW 2320 | | | | | | |
| By Bank Transfer | Maitland and Beyond Family History BSB: 650 300 Account No: 544283002 | | | | | | |
| | If sending payment by Bank Transfer, please include your name and the word MEM as the | | | | | | |
| | reference/description so that we can identify your payment | | | | | | |

Privacy Statement

We take your privacy seriously. Information we gather about you is for administration purposes and for us to supply you with information, newsletters, Journals etc. We will not knowingly supply your personal details to any Third Party without your consent.

Public Register of Members

MBFH is required by law to keep a Public Register of Members. The minimum information that must be recorded is each member's name. By law any member can ask to see the register and copy any information on that register. There are restrictions on its use. You have the right to determine what information is made available on that register in addition to your name.

| I give permission for the following to be included on a Public Register of Members . | | | | | | | |
|--|------|--------------|------|---------------|-----|--|--|
| Address: 🗆 Yes | 🗆 No | Phone: 🗌 Yes | 🗆 No | E-mail: 🗆 Yes | □No | | |
| Members can alter or withdraw any permission they have given regarding these details at any time in writing. | | | | | | | |

Confidentiality Agreement

A MBFH Member may, on occasion, come into contact with information about people, living or dead, through various procedures, meetings, research, presentations or other circumstances. The MBFH Member agrees not to act on, share, make public or use any information they obtain about people other than in accordance with tasks or activities associated with the member's role. "Confidential Information" means all information or data relating to personal information in all forms including documents, databases, records, drawings or oral disclosures.

Code of Conduct/Ethics.

As a member of MBFH:

- You agree to abide by copyright law and respect the rights of copyright owners.
- You will not publish any material of a sensitive nature that may cause hurt and embarrassment to anyone.
- You agree not to publish any details of any person that could lead to identity theft.
- You agree to treat your co-members of MBFH with respect.

By submitting this form and paying the membership fee, you are acknowledging that you have read the information above, and that you agree to abide by the Confidentiality Agreement and Code of Conduct/Ethics