

Sebastopol Historical Society Inc.

**Membership Application Form**

Please complete the following forms and return them with payment (cash and cheque accepted, eftpos available) to one of our meetings or mail with details of a bank transfer or a cheque (made out to Sebastopol Historical Society) to:

The Treasurer,

Sebastopol Historical Society,

C/- Sebastopol Community Centre,

185 Yarrowee Street

Sebastopol, VIC 3356

Payment may be made by direct deposit to our bank account at

Bendigo & Adelaide Bank BSB 633-108 Account No 1642-55689…Account name: Sebastopol Historical Society..(Please include your surname and reason for payment in the reference field. eg. Smith membership)

Post your form to the above address or email a scanned copy to the treasurer at: nkaleckie@optusnet.com.au

**OFFICE USE ONLY**

Membership approved & entered on membership roll.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Membership Application**

**Sebastopol Historical Society, Victoria, Australia**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Postal Address (if different to above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No. Mobile:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landline:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Select membership category:

* Single Membership: $30-
* Concession Membership: $15-

(Health Care Card holders.)

I would like to make an additional donation of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL ENCLOSED $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. *Membership expires at the May AGM. If joining in Feb, Mar, April your membership will expire at the end of May in the following year.*

* I am paying by online bank transfer (preferred)
* Cheque
* Cash (at society rooms)
* EFT (at society rooms)

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_**

I would like to volunteer to help with (or learn more about) the following activities at the Sebastopol Historical Society and Museum:

* Participating at the Museum open days on the first Sunday of the month from 1.00-4.0pm.
* Organising walks, talks and tours
* Helping to preserve Sebastopol’s history by cataloguing, indexing and / or scanning documents, photos and other objects donated to the archives and museum.
* Photographing local buildings, sites, events or people
* Interviewing people as part of local oral history projects
* Preparing displays/exhibitions
* Editing or contributing articles to the newsletter
* Maintaining /updating the society website
* Responding to requests for information from the public
* Help with fundraising and promotional events
* I have items I wish to donate to the Society
* Building maintenance at the Museum/ Community Centre
* Gardening at the Sebastopol Community Centre
* Speaking at a monthly meeting on the topic of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I have expertise to offer the Society in this/these areas:

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