SALE HISTORICAL MUSEUMS INC.

Incorporation Number: A0127820Z
ABN: 82 335 319 144

PO Box 724
SALE Vic 3850
Email: salemuseums@outlook.com
Phone: 0437 296925
or: 0427 446 661

MEMBERSHIP FORM

Please complete this annual membership application form for the 2026 – 2027 year

I, **(FULL NAME)** _____ support the purposes of the Sale Historical Museums Inc., and agree to comply with its rules.

SIGNATURE…… **DATE** _____

Address: _____

_____ Postcode _____

Phone no: _____

Email address _____

Please tick the category of membership you require:

☐ Individual Member - $15.00

☑ Family (2 adults plus primary school aged children living at same address) - $20.00

Subscriptions are due by 1 September each year and are valid until the following 31 August.

Please pay by internet banking, the details are listed below:
NATIONAL AUSTRALIA BANK BSB: 083-879 Acc: 251394614

Please include your name in the reference field**. A membership form MUST be completed.**

Areas of interest (check all applicable)

☐ Local History ☐ Foster St Museum

☐ Water Tower ☐ Powder Magazine

☐ Research ☐ Cataloguing

☐ Other/details _____

FOR OFFICE USE ONLY

Application received (date) _____ Payment accepted (date) _____

Application accepted by Executive Committee (date) _____

Or Refusal advised (date) _____