

WAFF Membership Form

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WAFF Membership Form

New [...] Renewal (Number)

Personal Details:

Name:

Partner:

Address:

Postcode:

Home: Mob: Work:

Email: @

Web: WWW.....

Occupation/special Talents:

Interests:

Song [...] Music [...] Prose [...] Dance [...] other please specify.....

Are you a performer and/or teacher [...] Are you interested in the booking service [...]

if so please give us details for the database so that we can pass on enquiries.

Would you be willing to donate your time and/or expertise for the WAFF occasionally [...]

If Yes, in what way would you be able to help?.....

Annual Subscription Rates

Single: \$20 [...] Family: \$30 [...] Affiliate: \$40 [...] (Membership expires 12 months from receipt of payment)

Please forward with payment to:
WA Folk Federation, PO Box 328, Inglewood, WA, 6932

Enclosed is my cheque/money order for : \$

Credit Card Number: ____ / ____ / ____ / ____

expiry date of card: ____ / ____ Type: Bankcard [____] Visa [...] MasterCard [...]

Signature:..... Date:.....

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