Royal Australian Corps of Signals Fund (Corps Fund)

Member Application Form

rasigs.corpsstaff@defence.gov.au www.rasigs.org

General Information

Title:	Rank:	PmKeys Number:	
First Name:		Last Name:	
Post Nominals:		Current Unit:	
Contact Info	rmation		
Street Address:		City:	
State/Territory:		Country:	Postcode:
Preferred Ema	il Address:		
Contact Numb	er:		

Membership Fees

There are two payment options available for voluntary subscription to the Corps Fund.

Other Ranks (SIG – WO1): \$26 annually (for a maximum period of 10 years) or a single payment of \$260

Officers (LT – Star Rank): \$36 annually (for a maximum period of 10 years) or a single payment of \$360

Membership Option:

Agreement

I, the undersigned, apply to become a member of the Corps Fund.

I agree to pay the membership fee, applicable to my selected membership option. I understand that the membership period for annual subscriptions is per calendar year until such time that I notify the Corps Fund of any changes.

I accept the offer to become an affiliate member of the Certa Cito Foundation and acknowledge that only my name, email address and membership date will be provided to the Certa Cito Foundation for the purposes of administering my affiliate membership.



Signature:

Date:

Bank Details

Account Name: RASIGS Fund BSB: 833 205 Account No: 20517556 Reference: Applicants First and Last Name

Corps Fund Action:

Processed By:

Signature: