



Dear Member,

Subscription form

Please return this form with your payment details and any corrections necessary to:
AMOU, PO Box 407, HAYMARKET, NSW, 1240.

Name _____
Address _____

Your AMOU number is:
You are currently financial to:

E-mail address work: _____

Email address home: _____

Phone number (Home): _____

Section: _____

Phone number (Work): _____

Certificates: _____

Mobile: _____

Date of birth: _____

Endorsements: _____

Seismic Anchor DP

Employer: _____

Ship: _____ Grading/Position: _____

AMOU Subscriptions - Total amount due including GST (\$): _____

Please select to pay your total fees in up to four instalments only: 1 2 3 4

If you are paying by credit card and select more than one instalment, (financial members only) the total amount authorised will be divided and deducted automatically as explained in the fees letter.

Credit card payments:

Card number:

Expiry date: /

Visa M/Card

Signature: _____

Cheque payments:

A cheque or money order is enclosed for the amount of: \$ _____

Electronic Funds Transfer payments:

Amount transferred \$: _____ Date: _____

Commonwealth Bank Name: Australian Maritime Officers Union

BSB: 062 006 Account No.: 105 737 50 **Reference: Name and/or membership number**