



**FORM A – Australia ONLY**

Office use only  
Member # issued

**FAMILIES AND FRIENDS OF THE FIRST AIF Inc (FFFAIF)**

(Incorporated under the Associations Incorporation Act 2009) ABN 67 473 829 552

**Membership Application Form (Clause 3 (1))**

Date processed  
.../.../201

DGRs rec'd

Receipt #:

W.L; C.S;  
L.P; T.Info.

"Dedicated to Digger Heritage"

**SINGLE ADULT/CORPORATE MEMBER – AUSTRALIA**  
**[FAMILY or OVERSEAS APPLICANTS use Form F, Form O or Form OF]**

www.ffaif.org.au

email: [membership@ffaif.org.au](mailto:membership@ffaif.org.au)

Ph: 0401 467 819

**PLEASE PRINT USING A BLACK PEN IN ALL CAPITAL LETTERS**

**I**, (Title) ..... (First name)..... (Second name).....

(Surname)..... (Post nominals) .....

**OF** (Address – Please Print).....

(Suburb/Town/City)

(State)

(Postcode)

Occupation: ..... Mobile: ...../...../.....

Phone: ..... Fax: .....  
(Area code) (Number) (Area code) (Number)

Email address: (Please Print).....

**HEREBY APPLY** to become a member of the above named incorporated association. In the event of my admission as a member, I agree to be bound by the constitution of the association for the time being in force, available on the website.

**APPLICANT**

**SIGNATURE** ..... Date ...../...../20..... Committee will complete proposer / seconder if no FFFAIF members are known to the applicant

**Proposer : I**, ..... a member of FFFAIF, nominate the applicant for membership of the association

Signature ..... Date ...../...../20..... Member No .....

**Seconder: I**, ..... a member of FFFAIF, second the nomination of the applicant for membership of the association.

Signature ..... Date ...../...../20..... Member No .....

**Subscriptions** payable in Australian Dollars ONLY before 1 July each calendar year (Membership year is July to June) and are subject to change without notice. **Payment** by direct deposit (ANZ), cheque, money order or cash only.

**Bank details:** BSB 012-402; **Account Name:** Families & Friends of the First AIF Inc; **Account number:** 1101-42368; **Reference:** "your surname – JOIN" [If bank doesn't allow use of name, please substitute your phone# or postcode as reference.]

Please circle: **Adults & Corporate:** \$50pa. **Concessions: Seniors** (65 yrs +), **youth** (up to 18 yrs) and **fulltime students:** \$40 pa.

**The John Laffin Travel Scholarship Prize (ABN 49 207 476 906)** is a Charitable Trust Fund providing scholarships in the field of Australian History with major emphasis upon the participation of Australians in the Great War of 1914–1918. If you wish to make a donation to the Fund, please enter the \$ amount below and add this amount to your membership subscription.

**Amount \$** ..... Gifts over \$2 are tax deductible under Section 30-15 of the Australian Income Tax Assessment Act 1997.

Should you have a **specific** interest (person or unit) in the First Australian Imperial Force, The Royal Australian Navy, The Australian Flying Corps, the AN & MEF or the Australian Army Nursing Service, 1914-1918, please give details over-page. **INFORMATION IS PROVIDED SUBJECT TO CONDITIONS AT BOTTOM OF FORM B.**

**Permission to publish limited personal details in a list circulated annually to FFFAIF members.**  
**Please see over page – FORM B**



Send completed application form + appropriate subscription & donation (if applicable) to:  
Membership Secretary FFFAIF Inc, PO Box 4208 OATLEY WEST NSW AUSTRALIA 2223  
[Please DO NOT send cash by mail]

## FORM B

**Biographical list** of FFFAIF member's WWI relatives/friends from the RAN, AFC, AN&MEF, Aust. Army Nursing Service and Aust. Army. The information collected will be added to a database for reference by FFFAIF members and other interested parties. Please complete with as much detail as possible.

Rank & Name	Service N <sup>o</sup>	Enlistment Unit	Other Units

This database may be displayed on our website and/or published once a year in booklet form for use as a research tool.

**PRIVACY:** Apart from your FFFAIF Member Number, **please only fill in details that you are willing to have published to allow contact by other FFFAIF members.**

Individual member's personal contact details will not be included on our website. Initial contact will be made through FFFAIF email address.

If non members seek member's contact details, we will contact that member before passing on any information.

### **Permission to Publish Membership List**

FFFAIF, in accordance with its Rule 7, is required to maintain a Register of Members' names, addresses and date of joining, that may be inspected by Members, and Members may obtain a copy of any part of the Register (for a fee). FFFAIF only uses this information for the purposes of furthering the objectives of the FFFAIF and does not provide this information to other organisations (except if required to by law). To facilitate interaction between Members, the FFFAIF Committee is considering making a **List of Members** available for circulation to Members. In accordance with the *National Privacy Principles*, the FFFAIF Committee is seeking your consent to collect **your personal information** for inclusion in a List of Members. If you decide to add your details to the list and later change your mind, you may 'opt out' at any time by advising FFFAIF in writing. You must be financial for your details to be included in the list. If this form is not returned or if there is no preference selected or the selection is unclear, NO information will be included in the list.

Please indicate your preference by circling one of the 2 options below and initialling your choice:

**Option 1** – NO information. Please circle and initial \_\_\_\_\_

**Option 2** – Basic location identified as shown below. Please circle and initial \_\_\_\_\_

Option 2	Membership No.	First name	Family name	Suburb/Town	Postcode	State
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