



The Roselovers Association Inc.

Membership Application Form

(A household is regarded as a single membership)

First Name _____

Family Name _____

Contact Phone _____

Mobile Phone _____

Address Line 1 _____

Address Line 2 _____

Suburb _____

City _____

Post Code _____

Email _____

Payment method (please tick) Cheque Cash Direct Debit

Cheques payable to Roselover Inc Direct Debit [BSB 034034 Account 157044](#)

Postal Address of Roselovers.

The membership Secretary Roselovers

PO Box 1205 Stafford Mail Exchange, Stafford Qld 4053

Joining and annual fee is \$10 per household

Membership renewal is \$10 payable 1 July of each year.

Signed _____

Date _____

New members joining after Easter entitles membership till 1 July of the following year. Email contact..... roselovers2002@hotmail.com