



Hindu Society of Victoria (Aust.) Inc (HSV)
Registered No: A0001538M / ABN: 38 837454 881

SHRI SHIVA VISHNU TEMPLE
52, Boundary Road, Carrum Downs, Victoria 3201, Australia
Tel: (03) 9782 0878 <http://www.hsvtemple.org.au/>

Membership Application Form

IMPORTANT: MUST COMPLETE ALL THE INFORMATION IN BLOCK LETTERS

Applicant's First Name:Surname:
Spouse's First Name: Surname:
Residential address:
..... Post Code:

(Proof of residential address may be requested prior to approval by the Management Committee)

Tel/Mob number: Email:

Type of Membership and Subscription (Please tick one category only)

- A. **Annual Member** (1 January – 31 December)
 - Individual \$55.00
 - Family \$75.00
 - Student, Pensioner & Unemployed (Single/Family) \$55.00
- B. **Life Member**
 - Single or Family \$750.00

(Life membership payment can be paid in a single payment or 5 instalments of \$150 within a year.)

Membership will not be valid until full payment is made)

Payment Method (Please tick applicable box)

- Cash at the temple office Cheque at the temple office EFT
- EFT: **Hindu Society of Victoria (Aust) Inc. BSB 083 004 A/c No 18565 2784**
- (Please state "Mem'ship- Member's name" in the description)**

Credit Card payment can be made at the Temple Office.

I/ We wish to become a Life Member/ Annual Member for the year of the Hindu Society of Victoria (Aust.) Incorporated. (HSV)

- I / We enclose cash /cheque /money order /EFT details /credit card payment for \$
- If admitted I / we agree to abide by the HSV's [constitution and it's policies and procedures.](#)
- I/ We wish to receive the HSV's Panchavati newsletter by Email / Mail
- I/We also understand that our details can be used for HSV's business matters.

Applicant's Spouse's
Signature: Signature: Date:

The applicant should be introduced by an existing member of HSV. If you do not know any members please contact the Secretary at Secretary@hsvshivavishnutemple.org.au

The applicant is known to me and declare the above information is correct and true.

Introduced By: (Full Name)

Membership No. Signature

Please hand over the completed application form and subscription to the temple office or mail to **The Secretary, Hindu Society of Victoria (Aust) Inc., 52 Boundary Road, Carrum Downs, Victoria, 3201, Australia, for approval / disapproval by the Management Committee.**

Office Use Only

Payment made	Full payment / 1st Instalment	2nd Instalment	3rd Instalment	4th Instalment	5th Instalment
Amount (\$)					
Receipt No					
Date					

Approved / **Not approved** at the Management Committee Meeting held on:

Signature of the Secretary: Membership No. Allocated: