



AUSTRALIAN  
NATIONAL  
CHORAL  
ASSOCIATION

# THE AUSTRALIAN NATIONAL CHORAL ASSOCIATION

ABN 84 529 930 920—--ARBN 097 629 448

2018 - 2019

## MEMBERSHIP APPLICATION FORM / TAX INVOICE

**Return to:**

ANCA Administration  
c/- Stockdale ACS  
3/6 Atherton Rd  
Oakleigh VIC 3166

Email: [admin@anca.org.au](mailto:admin@anca.org.au)  
Fax: 03 8610 1936

**Membership Application**    New Membership    Renewal    Re-joining

APPLICANT NAME (Choir / School / Individual/ Institution) \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

POSTAL ADDRESS \_\_\_\_\_ SUBURB \_\_\_\_\_

STATE \_\_\_\_\_ POSTCODE \_\_\_\_\_

TEL (W / H) (\_\_\_\_\_) \_\_\_\_\_ (M) \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

EMAIL \_\_\_\_\_

USERNAME \_\_\_\_\_ PASSWORD \_\_\_\_\_

Please create a username and password for your membership account. This will be set up when your application is processed. Once logged in you can manage your account, update address details, apply for insurance, list your choir and more!

**Choir/School/Organisation details**

CONDUCTOR'S NAME \_\_\_\_\_

CHOIR WEBSITE \_\_\_\_\_

CONTACT EMAIL (if different from above) \_\_\_\_\_

REHEARSAL DAY & VENUE \_\_\_\_\_

**Membership Type** PLEASE TICK BOX

- SCHOOL (per campus) \$90.00
- CHOIRS AND CHORAL ORGANISATIONS TYPE A (1 - 74 members) \$90.00
- CHOIRS AND CHORAL ORGANISATIONS TYPE B (75 - 299 members) \$130.00
- CHOIRS AND CHORAL ORGANISATIONS TYPE C (300+ members) \$180.00
- INDIVIDUAL MEMBERSHIP \$75.00
- CONCESSION (students/ pensioners only) \$49.00
- INSTITUTION (subject to council approval) \$160.00

Through a partnership with Aon Risk Solutions, ANCA can offer discounted insurance policies to members. Once your membership payment has been processed, please log in to the Members' Area via [anca.org.au](http://anca.org.au) using your log in details above. Select *Signup for Insurance Online* to apply. Aon will follow up your application, or you may call on 1800 123 266 with any queries.

**Method of Payment**    CHQ    CREDIT CARD    EFT to BSB: 034 063  
Acc #269 440

       

CARD TYPE   Visa / Mastercard

NAME ON CARD \_\_\_\_\_ CREDIT CARD EXPIRY DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

SIGNATURE \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_