



Serving girls and women in Sydney

- G** God first
F Friends next
S Self last

GFS Sydney New Membership Form for 2024

I would like to apply for membership of GFS Sydney for 2024

New members please complete the following forms:

- GFS Sydney New Membership Form for 2024
- GFS Sydney Application for Membership

No membership fee is required for the calendar year you join GFS.

Name: _____

Address: _____

Postcode: _____

Home Phone: _____

Mobile: _____

Email: _____

Date of Birth: _____

I am currently attending a:(please indicate) GFS Branch/Adult Group: ☐

Kids Club: ☐

Playgroup: ☐

Not attending any group: ☐

Other: ☐

Group Name: _____

Church Name: _____

Suburb: _____

I am a GFS commissioned leader: ☐

I was commissioned in year: _____

Please indicate if applicable:

I **do not** want photos of me in the newsletter, on the GFS Website or in any promotional material. ☐

Please continue form over page.

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Please complete this box **only** if you are a leader in a group with children.
I have:

• **Working with Children Check** No: _____

• Date expires: _____

• **Safe Ministry with Children and Youth Training**

Date completed: _____

Certificate Number: _____

• **Safe Ministry Check**

Date of Clearance: _____

Name of Church: _____

Name of Minister: _____

• **Other qualifications:** _____

When my registration is accepted, I agree to abide by the rules of GFS Sydney and will at all times endeavour to uphold and comply with the Policies and Procedures and the Ministry requirements of the Sydney Diocese.

Signature: _____

Please indicate if applicable:

I would like to receive GFS Sydney's Newsletter by ☐ Post ☐ Email ☐ No thanks

I would like to receive GFS Sydney's Prayer Guide by ☐ Post ☐ Email ☐ No thanks

NOTE: \$25 per person per year

for Newsletter/Prayer Guide to be sent by Post

I would like to donate \$_____ to GFS Sydney Inc.

Payment Details: ☐ Cheque (payable to GFS Sydney Inc.) or

☐ Electronic Funds Transfer to GFS Sydney Inc.

Please forward to: BSB:032 008 Account:410596 (Westpac)

(Please make a reference for our bank statement of your surname and payment reason)

Total Amount \$_____ enclosed I do not require a receipt: ☐

Please return this completed form to: GFS Sydney Incorporated

P.O.Box374

Emu Plains NSW 2750 or

E:info@gfs-sydney.org

Application for Membership

GFS Sydney Incorporated

(Incorporated under the Association Incorporation Act 2009)

I, _____
(Full name of proposer)

of _____
(Name of church)

a member of GFS Sydney Incorporated or a member of the Anglican Clergy or leader of a Christian church *(delete as appropriate)* nominate the applicant, who is personally known to me, for membership of GFS Sydney Incorporated.

(Signature of proposer) _____
(Date)

I, _____
(Full name of applicant)

of _____

(Address)

(Phone number – home) _____
(Phone number –work) _____
(Phone number – mobile)

(Email address) _____
(Date of Birth)

(Name of Church attended)

(Occupation)

I hereby apply to become a member of the above mentioned 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.

(Signature) _____
(Date)