

GFS Sydney Membership Renewal Form for 2025

I would like to apply for membership of GFS Sydney for 2025

Membership - \$30 per year
 Concession - \$20 per year

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: 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.Page 1 of 3		

Please complete this box only if you have:	
• Working with Children Ch	eck No:
Date expires:	
• Safe Ministry with Childre	n and Youth Training
Date completed:	
Certificate Number:	
Safe Ministry Check	
Date of Clearance:	
Name of Church:	
Name of Minister:	
Other qualifications:	
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Include a reference for our Bank statement of your name and reason for payment

Please return this completed form to:

GFS Sydney Incorporated P.O. Box 374 Emu Plains NSW 2750 or

E: info@gfs-sydney.org

GFS Sydney Incorporate	ed
rated under the Association Incorpo	pration Act 2009)
(Full name of proposer)	
(Name of church)	
	gy or leader of a Christian church (<i>delete a</i> s r membership of GFS Sydney Incorporated.
er)	(Date)
(Full name of applicant)	
(Address)	
(Phone number –work)	(Phone number – mobile)
	(Date of Birth)
(Name of Church attended)	
	rated under the Association Incorpor (Full name of proposer) (Name of church) ed or a member of the Anglican Cler who is personally known to me, for ser) (Full name of applicant) (Full name of applicant) (Address) (Phone number –work)

(Signature)

(Date)