

First Floor 20 Chancery Lane Adelaide SA 5000

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## **Registration Form**

I hereby apply to register as a Member of the Fire Service Fund and shall comply with the Rules or a motion passed at any constituted meeting of the Fund.				
Type of Membership:		FULL	(Current Personnel)	
		ASSOCIATE	(Retired Personnel)	
Name:				
Address:				
Contact Details:				
Home Telephone:		Work Telepho	Work Telephone:	
Mobile Telephone:				
Email:				
Employer: (if applicable)		Pay ID:	Pay ID:	
Signature:		Date:		