



PORT HEDLAND HISTORICAL SOCIETY

6 Anderson Street, Port Hedland WA 6721
PO Box 371, Port Hedland WA 6721

Membership Application

Name of Applicant: _____

Home Address: _____

Postal Address: _____

Contact Number: _____

Email Address: _____

Annual Membership Subscription: (please tick)

Ordinary member:	<input type="checkbox"/>	Single	\$20.00
	<input type="checkbox"/>	Family	\$30.00

Student and Pensioners:	<input type="checkbox"/>	Single	\$15.00
	<input type="checkbox"/>	Family	\$25.00

I am interested in the following areas: (please tick)

General Interest Volunteer Assistance

Publicity Social Program

Marketing Historical Research

Other (please specify): _____

Applications/Nominations will be presented at the Management Committee Meeting of the Society. Meetings are held on the 2nd Thursday of the month.

Signature:

Date: