

# SYDNEY BUS MUSEUM



## APPLICATION FOR MEMBERSHIP

1. Mr  Mrs  Ms.

Given Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Postal Address:

\_\_\_\_\_

\_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Residential Address if different:

\_\_\_\_\_

\_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Occupation \_\_\_\_\_

Licence Number \_\_\_\_\_ Class \_\_\_\_\_

Licence expiry date .....

MOT Driver Approval \_\_\_\_\_

2. See the Rate card for categories  
What type of membership would you like?

.....  
Date of birth (if Student)

.....

3. As a member, what Museum Activities would you be interested in? (tick)

- BUS DRIVER / CONDUCTOR
- BOOKSHOP ASSISTANT
- TOUR GUIDE
- SITE MAINTENANCE
- BUILDING MAINTENANCE
- VEHICLE REPAIRS - MECHANICAL
- VEHICLE REPAIRS - BODY
- BUS RESTORATION
- MUSEUM BUILDING REPAIRS
- ARCHIVES AND RESEARCH
- SECRETARIAL / OFFICE
- FINANCIAL MANAGEMENT
- BOOKKEEPING
- COMPUTER SKILLS (eg member records)
- RETAIL MANAGEMENT
- SHOP ASSISTANT
- PURCHASING
- MAGAZINE ARTICLES
- PHOTOGRAPHY
- OTHER (name)

Training is offered in all these areas. To become involved, you are welcome to visit the Museum on any Saturday or Wednesday, and ask for the General Manager or introduce yourself at the Book Shop. Or you can phone the Museum on a Wednesday or Saturday, 10a.m. to 3 p.m.

4. Declaration:

I apply to become a member of Sydney Bus and Truck Museum Ltd., a company limited by guarantee. I agree to pay any fees as determined by the Board of Directors, and to be bound by the rules and constitution and by any variations thereof which may occur from time to time under the Corporations Act.

Signature .....

Application date .....

### PAYMENT DETAILS:

Please return this **whole** form, or photocopy of it to The Membership Officer at the address overleaf.

Enclosed is cheque / money order

Please charge my Visa / Mastercard

Card number \_\_\_\_\_

Name \_\_\_\_\_ Expiry \_\_\_\_ / \_\_\_\_

▪ OR pay at the Bus Shop Leichhardt, using this form.

**Bus Shop attendant:** Please staple the cash register receipt to this form, include it in the pay-in satchel, and please print your name here: