



Application for Membership - COMSOA 2023-2024

MEMBERSHIP CATEGORY (Please tick or circle)

Senior () \$285.00 Pensioner () \$260.00 Junior () \$100.00

Associate () \$145.00 (See requirements below)

I _____ of

(Full name of applicant)

_____ Post code _____

(Your Address)

DOB _____ Contact No _____ Email _____

Pension No _____ AUS No _____ Current/Previous Model club _____

MAAA Wings Rating Held _____

DATED _____ Signature of Applicant _____

YOUR PAYMENT DETAILS

Payment Amount \$ _____ Date Paid _____ Payment ID/Ref _____

Comments _____

NOMINATED BY (Must be current member of the COMSOA club)

Name _____ Signature _____ Dated _____

Name _____ Signature _____ Dated _____

COMMITTEE USE ONLY

Fee Payable/Paid \$ _____ / \$ _____ Date Payment Recognised _____ Receipt No _____

Application Approved YES / NO (Circle selected) Committee Meeting Date _____

INSTRUCTIONS

- Please complete and scan the form.
- Send the form via email to secretary@comsoa.com
- Associate members must provide a scanned copy of their MAAA card or MAAA payment evidence.