The Australian and New Zealand College of Notaries

Please return your completed Application Form to:
Level 1, 123 Church Street , Hawthorn
Victoria 3122 Australia
OR TO
FAX: **+61 3 9819 6078**
e-mail: **office@anzcn.org**

Application for Membership

Please Note:
• *Membership fees include Australian GST.*
Please print clearly in block letters.

I apply for membership of The Australian and New Zealand College of Notaries. (ABN 32 125 857 347)

Title: ☐ Mr ☐ Miss ☐ Mrs ☐ Dr ☐ Other: (Please specify)_____

Family Name:

Personal Name(s):

Honours and Awards (if any):

Residential Address:

Postcode:

Firm Name:

Postal Address (if different from above):

Postcode:

Telephone: Fax:

Email:

Preferred name on membership certificate:

I practice as a notary in:

Date of appointment or enrolment as a notary:

Applicant's signature: _____ **Date:** / /

Payment

☐ I enclose a cheque for **AUD $275.00** (inc. GST) payable to 'The Australian and New Zealand College of Notaries'

☐ I make a direct deposit of **AUD $275.00** (inc. GST) to The Australian and New Zealand College of Notaries to the following Account:
ACCOUNT NAME: ANZCN **BSB:** 083 004 **ACCOUNT NUMBER:** 857445084 **REF:** YOUR SURNAME
Bank Name & Address: National Australia Bank, 300 Collins Street, Melbourne Vic 3000 **BIC / Swift:** NATAAU3303M

☐ Please debit my credit card with **AUD $275.00** (inc.GST): **MASTERCARD OR VISA ONLY**

Card Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiry Date ☐☐☐☐ ☐ VISA ☐ MASTERCARD

Cardholder's Name _____ Cardholder's Signature _____