

# KISSING PONT PROGRESS ASSOCIATION

## New / Renew Membership

I wish to renew membership of the KPPA

I wish to join the KPPA

Date (mm/yyyy)

### Personal Details:

Title:  Mr & Mrs  Mr  Mrs  Miss  Ms

Other

First Name(s):

Family Name:

Address:

Telephone No:

email address:

*Your details will only be used for the purpose of communication with KPPA.*

**I would like to see the KPPA address the following issues:** *(optional)*

**FEE FOR MEMBERSHIP: \$10 pa,  
PAYABLE AT BEGINNING OF FINANCIAL YEAR.**

### Payment Options:

Direct deposit (EFT) to Commonwealth Bank Wahroonga  
BSB: 062 263, Account No.: 00900018.  
*(Please add your surname to the Reference field)*

I enclose a cheque payable to Kissing Point Progress  
Association Inc

Cash paid to:

*Please complete this form and send to: The Treasurer, KPPA  
Dierk Mohr  
21 Barwon Avenue  
South Turrumurra, NSW 2074*