



# Banking & Finance Consumers Support Association (Inc)

**BFCSA (Inc)**

PO Box75

Dowerin WA 6461

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APPLICATION FOR MEMBERSHIP OF AN INCORPORATED ASSOCIATION

## BFCSA Membership Application Form

Person 1 – Full Name	
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Person 2 – Full Name	
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Phone	( )	Mobile	
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Email	
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Address is required under section 27 of the Associations Incorporation Act (1987)

Address			
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Suburb		State		Postcode	
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How did you hear about BFCSA (Inc)?	Internet	
	Print Media	
	Word Of Mouth	
	TV Media	
	Other	
	If other – Please specify	

Have you been a victim of financial losses?	
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Bank or Lender/s involved?	
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Name of 'loan management' company	
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Other comments	
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### Declaration

In submitting my application, I agree to apply for membership to BFCSA (Inc) (currently \$50 per person per annum). I also acknowledge that BFCSA (Inc) reserves the right to refuse or cancel membership at any time at its own discretion.

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**Applicant Signature**

**Date**