



Australian Faith Community Nurses Association Inc.

AFCNA
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Annual Membership Application and Renewal (Membership is due each financial year i.e. 1st July to 30th June).

Membership gives you access to our professional association and the resources we offer, discount offers on professional development, conferences, on-line education, and events. Members have voting rights at the Annual General Meeting and are eligible to become Board members. Full membership is ideal for people interested in pastoral health and care ministry, faith community nurses, and health professionals working in faith-based settings.

- **Full Membership:** \$30:00 / year
- **Associate Membership:** \$20:00 / year available to valid concession card holders and students

About You

Please complete this form legibly to ensure your membership is processed accurately. Please answer each question, because this helps us keep an accurate database which enables us to effectively serve you. Your privacy is assured.

First Name _____ Surname _____

Postal Address _____

Suburb _____ State _____ Postcode _____

Phone _____

Email (print clearly) _____

Occupation _____ Speciality _____

Denomination _____ Local Faith Community _____

Qualifications _____

Payment details

Amount: Full Membership _____ Associate membership _____

Donation for the work of AFCNA: \$ _____

Your donations help fund scholarships, resource development and extends our work nationally and internationally.

Payment Type: Cheque / Money order / Electronic funds transfer (please circle)

To transfer funds electronically to AFCNA: BSB 704 – 874 Account NO. 10009636

Please insert your name as the reference code. Then scan and email or post the Membership Form so we have your correct contact details. Don't forget to let us know if you change your email address during the year!

Thanks so much for your ongoing membership. Please encourage colleagues and friends to join us in this ministry.