



'Preparing People for Effective Christian Service'

LIBRARY MEMBERSHIP APPLICATION

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MEMBER'S DETAILS

Surname..... Title.....
 First Name..... Second Initial.....
 Telephone (Home) (Mobile)
 E-mail.....
 Address.....
 Suburb..... Postcode.....

In order to help us improve our service, let us know how the resources in the Trinity Theological College Library will assist you, please tick (and provide details):

- Student (non-TTC student), place of study: _____
- Ministry Worker, organization: _____
- Alumni, graduation year and degree details _____
- Trinity Trustee/Council Member
- Other – please specify _____

TYPE OF MEMBERSHIP *Please circle the one that applies:*

Alumni (\$25.00 p.a.)	General (\$50.00 first year (\$35.00 renewal)	Trinity@Night (\$20.00 p.a.)
Alumni Life Membership (\$150.00)	General 5-year membership (\$150.00)	

PAYMENT METHOD

Payment by: Cheque Cash Credit Card EFTPOS Bank Transfer

Name on Credit Card: _____

Card Type: Visa Mastercard Expiry Date: /

Card Number: / / /

Signature: _____ Date: _____

Internet Bank Transfer: **Library Fund: BSB 086-006, Account No.: 560 085 401**

For bank transfer, please state clearly in the Reference as your name, Library Membership.

Office Use

Rec. #

Date: .../.../....

By:

All personal information on this form is for Trinity Theological College use only.