JOHN CALVIN SCHOOL

FREE REFORMED SCHOOL ASS. (TAS.) INC.

49-53 HOWICK STREET
LAUNCESTON, TAS. 7250
Ph: 6344 3794
Email: admin@jcs.tas.edu.au
www.jcs.tas.edu.au
ABN No 32 415 227 180

MEMBERSHIP
APPLICATION

First Name | Surname | Date of birth

Email address | Phone Number

Spouse First Name | Surname | Date of birth

Spouse email | Spouse phone

Street address | Suburb | State | Postcode

Free Reformed Church Membership ☐ Launceston ☐ Legana

Full Membership
Parent
Weekly fee: $96.00 ☐

For members within the Free Reformed Churches of Australia and have children enrolled at the John Calvin School Launceston. Members hold full voting rights. Despite having two categories of full membership, this category is the benchmark.

Full Membership
Non-Parent
Weekly fee: $67.00 ☐

For members within the Free Reformed Churches of Australia with no children currently enrolled at the John Calvin School Launceston. Members hold full voting rights and will receive school related correspondence on a regular

Full Membership
Special Circumstances
Negotiated fee ☐

This membership can be offered to members of the FRC churches of Australia who can no longer afford full membership contributions and yet wish to show continued commitment to the FRSA. Contributions will be negotiated during a Board visit and may not be less than one third of the current Membership Fee. Full membership privileges apply.

Donor ☐

In a situation where, one cannot commit to any of the above listed memberships and yet has the desire to support the school financially. These members will receive school related correspondence on a regular basis or whenever possible. No voting rights apply.

Amount per week: $ ☐

Funds Payable to:

1. **Free Reformed School Association Bank Details -**

Bank Name:	Commonwealth	Branch:	LTON
BSB Number:	067-003	Account Number:	2800 3237

Declaration:

- I agree to abide by the Constitution of the Free Reformed School Association (Tas) Inc.
- I declare that I am a current Member of the Free Reformed Churches of Australia
- I accept that fees shall be paid in advance, on a weekly/monthly/yearly basis

Signed _____ ***Date*** _____

Signed _____

Please return your completed form to either:

- ***Email: admin@jcs.tas.edu.au***
- ***Post: 47-53 Howick Street, Launceston TAS 7250***
- ***In person to the Admin office at school***

Administrative Use Only

Membership Approved at Board Meeting _____*(date)*

Signed: _____ *Date:* _____

Commencement date of payments: _____