

2018 RE-ENROLMENT FORM

Surname: _____ First Name: _____
(please print) (please print)

Member No: _____

Are you willing to volunteer? Yes / No (If Yes, please add relevant 18AAVOL code below)

COURSE CODE	COURSE NAME	DAY/DATE	TIME

I agree to the purposes of U3A Nunawading Inc. in accordance with the Terms & Conditions and allow my telephone number and/or email address to be disclosed to the Leader of any Class I attend.

Signed _____ Date _____