



Sydney Australian Filipino Seniors Inc (SAFSI)  
Email:safsi2025@gmail.com  
Phone no: +61451 419 490  
ABN: 67 606 464 212

## Membership Application Form

Name \_\_\_\_\_  
Surname First Name MI

Address \_\_\_\_\_  
\_\_\_\_\_

Date of Birth \_\_\_\_\_  
(dd/mm/yy)

Contact Mobile # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Next of kin \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact Person and Phone #  
\_\_\_\_\_

Residency Status (please tick one):  Australian Citizen  Permanent Resident

Education (optional) \_\_\_\_\_

Employment \_\_\_\_\_

Date: \_\_\_\_\_ Signature \_\_\_\_\_

### Nomination

I confirm that I have personally known the applicant for at least one year and formally nominate them for SAFSI membership.

Recommending Member Name \_\_\_\_\_ Recommending Member's Signature \_\_\_\_\_  
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Approved By Management Committee in its meeting held on \_\_\_\_\_

Paid \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_

Payment Received by (Printed Name & Signature) :  
\_\_\_\_\_

Facebook: SAFSI

Mission: To improve lives and well-being of Senior citizens through social engagement, advocating for senior's rights and participating in our communities