

# **MEMBERSHIP FORM**

**Personal Information** 

 2021 MEMBER
 : 021 - \_\_\_\_

 New Member
 : Yes / No

 2020 Member
 : Yes / No

Member before 2020: Yes / No

	First Name	:	Family Name :	
	Date of Birth	:	_ Nationality :	
	Contact details	: Mobile No:	_ Email Address :	
	Home Address	: Jl		
		(city)	_ (zipcode)	
	Home Phone	: ()		
Cc	ompany Informa	ntion		
	Company Name	:	Field :	
	Company Address	: Jl		
		(city)		
	Office phone	: () ext		
	Website : www	·	_	
Re	enew/New Me	embership 2021 ( <u>Note</u> : Member	nobile phone number) () area of residend ship is <b>annual</b> - January to December)	ce .
a.	Individual mem	borchin		
	() Regular membe	•		
		er *: IDR 4 <b>00.000</b>		
	() Associate mem	er *: IDR 4 <b>00.000</b> ber ** : IDR <b>600.000</b>		
	() Associate mem	er *: IDR 4 <b>00.000</b> ber ** : IDR <b>600.000</b> ber is actively involved in BIWA activities in		
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b.	<ul> <li>() Associate members</li> <li>A regular members</li> <li>** An associate members</li> <li>but is unable to</li> <li>Corporate members</li> </ul>	er *: IDR 400.000 ber ** : IDR 600.000 ber is actively involved in BIWA activities in ember supports BIWA's aims and would like actively participate in the functioning of B bership : IDR 2.500.000	e to attend functions when possible, BIWA.	
	<ul> <li>() Associate members</li> <li>* A regular members</li> <li>** An associate members</li> <li>** but is unable to</li> <li>Corporate members</li> <li>Please contact BIV</li> </ul>	er *: IDR 4 <b>00.000</b> ber ** : IDR <b>600.000</b> ber is actively involved in BIWA activities in ember supports BIWA's aims and would like actively participate in the functioning of B	e to attend functions when possible, BIWA.	
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Your BIWA membership card will be available at BIWA functions or BIWA Office on Tuesdays after payment has been received.

# A MEMBER IN GOOD STANDING ASSISTS BIWA

#### 1. Membership

a.	Would you	like to be pa	art of the r	membership o	committee?		Yes/ No
			-			_	

b. Could you provide transport for other BIWA members in your area? Yes/No

# 2. BIWA's Activity Team

a. Would you like to be part of the Activities team? Yes/Nob. Could you organize an activity for members? Yes / No

(cooking class, dancing class, yoga, handicraft, games, outing etc) , Please state what kind of activity:

- c. Recommend a venue for a luncheon, coffee morning or tea
- d. Recommend a place in Bali suitable for an outing

## 3. BIWA's Fundraising Team

a.	Would you like to be part of the Fundraising Team?	Yes/ No
b.	Can your company give BIWA members a discount?	Yes/No
c.	Would you like to book a vendor's table at a BIWA function	Yes / No

d. State items and/or vouchers you can donate for raffles

#### 4. BIWA's Social Welfare Team

a.	Would you like to be part of the Social Welfare Team?	Yes/No
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b. Recommend a foundation/organization you would like BIWA to support

### 5. BIWA's PR / Media Team

a.	I can write an article on a BIWA function	Yes/ No
b.	I can make photographs of a BIWA function	Yes/No

Signature member	Registered by:		
Name:	(Name:)		
Date:			