

**AUSTRALIAN BRIDGE DIRECTORS ASSOCIATION**

**Application for Membership of the ABDA**

I wish to apply for membership of the Australian Bridge Directors Association:

NAME (please print).....ABF No.....

ADDRESS

.....

.....PostCode .....

Phone (    ) ..... Mobile .....

Home Club .....

E-Mail

.....

I have directed at least ten sessions of duplicate bridge, and am therefore entitled to become a Full member of the Association.        YES / NO

If answering NO, you will be given Associate membership.

My Director Grading (where applicable): .....

I enclose \$25.00 (please make cheques payable to "ABDA" or "Australian Bridge Directors Association" as full payment of the Annual Subscription for the appropriate category of membership

( FULL / ASSOCIATE ), as established in the Association's Constitution.

Signed ..... Date .....

We cannot accept payments by credit card.

Please return this form with \$25 in cash or cheque only to:

Michael Phillips  
ABDA Treasurer  
PO Box 836  
ARTARMON  
NSW 1570

Ph 02 9901 3373  
Email mike@smarthomedesign.com.au