



MEMBERSHIP APPLICATION

*Become a member of the Australian National Boxing Hall of Fame.
All members receive membership card, badge, pin and up to date
information on news and events organised by the ANBHOF.*

Name: _____

Address: _____

Phone: _____ Mobile: _____

Email: _____

Boxing
History
(if any) _____

I wish to become a member of the Australian National Boxing Hall of Fame Inc and will abide by all rules and regulations as determined by our membership.

Signed: _____ Date: _____

Membership:

New members joining fee \$20.00, plus annual membership fee \$10.00

I enclose payment of \$_____ in the form of:

Cheque (payable to Australian National Boxing Hall of Fame)

Money Order

Credit Card: Visa

Mastercard

Card Number _____

Expiry _____

Name on card _____

Signed _____

AUSTRALIAN NATIONAL BOXING HALL OF FAME Inc

ARBN 100 642 386 ABN 37 739 336 623

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www.anbhof.com

President: Brett McCormick **Vice President:** Paul Tatchell

Secretary: Peter Banks **Treasurer:** David Hanvey