



Old Girtonians'
ASSOCIATION

LIFE MEMBERSHIP APPLICATION

First Name: _____ Surname: _____

Name at school if different: _____

Postal Address: _____

Suburb: _____ Post Code: _____

Home Phone: _____ Mobile: _____

Email Address: _____

Occupation: _____

Date of Birth: _____ House: _____

Boarder: ☐ Yes ☐ No Gender: ☐ Male ☐ Female ☐ Other

First Year at Girton: _____ Class Level: _____

Year Left Girton: _____ Class Level: _____

Please indicate if you would be interested in becoming involved in any of the following:

Giving a Career Talk: ☐ Yes ☐ No Taking on a Work Experience Student: ☐ Yes ☐ No

Being a Mentor: ☐ Yes ☐ No Being a Mentee: ☐ Yes ☐ No

OGA Life Membership Fee \$150.00

Payment Options:

- A) Cheque made payable to Girton Grammar School
- B) Direct Bank Deposit Bendigo Bank Girton Grammar School BSB 633 000 A/C 115719106
- C) Credit Card Visa / Mastercard

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Card Holders Name _____

Signature _____ Date _____