



GLITF

Gay and Lesbian Immigration Task Force (Vic) Inc.

Registered No. A0027220V ABN: 96 304 922 439

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Application for Membership or Renewal of Membership.

Membership details are kept confidential

Please tick appropriate box

New Membership:

- Full year (from date of joining): Single or Couple: \$150.00. Includes GLITF Guidebook.

Renewal of Membership:

- Full year: Single or Couple: \$150.00

All Overseas Memberships – Add an additional \$20 if GLITF Guidebook is required.

Please print in CAPITAL LETTERS and SIGN form on reverse side AFTER reading the disclaimer

Date (dd/mm/yy)/...../.....

Given Name of Sponsor.....Family Name.....

Given Name of ApplicantFamily Name.....

Home country of Visa Applicant (for statistical purposes only).....

Postal Address.....

..... (Post Code)

Telephone:..... Mobile:Email:.....

Please find enclosed \$..... Receipt No. (GLITF use only)

M/ship No. (GLITF Use only) Guide (GLITF use only) M/ship Card

Please see reverse side to sign and for postal instructions

Acknowledgment of Disclaimer in Relation to Provision of Information and Advice

I/We acknowledge that any information contained in the Newsletter or other publications of Gay and Lesbian Immigration Task Force (Vic) Inc. Reg. No. A0027220V (“the Association”) or available on the Association’s Website or provided otherwise by the Association or any of its members or office bearers is of a general nature only and does not constitute advice of any kind. Neither the Association nor any of its members or office bearers warrants the accuracy of any such information or its applicability to any particular case and cannot be held responsible for any loss or damage occasioned by anyone acting on the basis of such information.

I/We acknowledge that the Registered Migration Agents (“Migration Advisers”) acting under the Association’s auspices give only migration advice and do not undertake responsibility for any application which I/we may make to the Department of Immigration and Border Protection which application I/we acknowledge to be my/our own responsibility and that it is my/our responsibility to verify, including the obtaining of legal advice, any matter that is of importance to me/us. Under no circumstances is anything written or said by the Association or by any of its members, office bearers or Migration Advisers to be understood to be legal advice.

I/We acknowledge that receipt by me/us of any information from the Association or from any of its members, officer bearers or Migration Advisers, constitutes acceptance of these terms and I/we agree to indemnify the Association, its members, office bearers and Migration Advisers from any and all claims arising whether directly or indirectly in any manner whatsoever from the receipt of such information and/or advice.

If this acknowledgment is signed by one of us on behalf of joint members, the signatory warrants that he/she has the authority to bind the other member and agrees to indemnify the Association, its members, office bearers and Migration Advisers from any claim by the other member.

Signature.....
(Sponsor)

Signature.....
(Visa Applicant)

Send this **signed** application form with crossed cheque/money order payable to GLITF (Vic) Inc. to “GLITF (Vic) Inc. PO Box 2387, Richmond Victoria 3121, Australia” or come to one of our meetings and join up there.

Meeting Venue and Times

All Meetings are held at the **Betty Day Care Centre, 67 Argyle Street, St Kilda.**

General Information Meetings are held at **5 pm** on the **first Sunday** of every month **except January.**

Advice Nights are held **7.00 pm** on the **third Monday** of every month and are for **members only** seeking specific advice from GLITF (Vic) Inc.’s Migration Advisers in relation to their own position or application.