

THE GOAN OVERSEAS ASSOCIATION OF VICTORIA (INC.) ABN 45 379 439 322

APPLICATION FOR MEMBERSHIP

Email: goav@goav.org.au

Website: www.goav.org.au

The Secretary, GOAV

I desire to become a member of the GOAV and agree to abide by the Association Rules1.

ADDRESS: DATE OF BIRTH: PHONE HOME: MOBILE: PHONE GOAV Members Connect WhatsApp group SPOUSE/PARTNER: PHONE: PHONE: E-MAIL: ² DEPENDENT CHILDREN (18 years and under): Names Date of Birth Male/Female Male/Female Male/Female Ordinary Member: Goan origin. Name of village in Goa (if known): Associate Member: Non-Goan origin with keen interest in Goan culture / heritage.	Required Information:				
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¹ Rules Book is available on the GOAV website (Membership page).

 $^{^{\}rm 2}$ Opt-in consent to receive electronic delivery of the GOAV events flyers and other communications