



10 Wirra Wirra Avenue Enfield South Australia 5085

Tel. 08 8344 4514 Mob. 0433 812 286 email. badwolf76@adam.com.au

Application Form for Membership

NAME:

(Please print) (Family name) (First name)

TITLE: (Dr.Mr.Miss.Ms.etc) **SEX:**(Male/Female).....

MAILING ADDRESS:

.....

..... **Postcode:**.....

Telephone: **Mobile:**

Email: **Fax:**

WRITING EXPERIENCE:

.....

.....

SPECIFIC WRITING INTEREST: e.g. Novel writing; short stories

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PAYMENT OF MEMBERSHIP FEE

Fee of **\$25.00** per annum

Please make payment in cash to:-

*Crime Writers of South Australia
C/O Treasurer – Chris Ostermann
16 Rodger Avenue,
Leabrook SA 5068*

Tel. 08 8331 7041

Enquiries www.ostermannp@bigpond.com