

The Pioneers Association of South Australia Inc.

Junior Pioneer Membership Application

The Pioneers Association of South Australia
Level 2, Stafford House, 25 Leigh Street, ADELAIDE, SA 5000
Ph. 08 8231 5055 E. membership@pioneerssa.org.au



To make an application for Junior Pioneer membership please complete the details below. Email it or post it to the Membership Officer at PASA. The application will be reviewed to ensure it meets the eligibility criteria.

Junior Pioneers receive a membership certificate and the Association holds special events for Junior Pioneers.

We encourage Junior Pioneers to become a full Pioneer Member when they turn 18.

There is no annual subscription just a one-off registration fee of \$30, payable when the application is lodged.

NOTE: A separate application form is required for each Junior Pioneer applicant.

1. Junior Pioneer Applicant Details (please fill in all fields)

Full name: _____ Preferred name: _____

Date of Birth: ____ / ____ / ____

2. Parent's Contact Details (please fill in all fields)

Mother's full name: _____ Preferred name: _____

Father's full name: _____ Preferred name: _____

Phone (Home): _____ Phone (Mobile): _____

Email: _____

Postal Address **Preferably the parent's address, this is the address where all mail for the applicant will be posted.**

Number & Street: _____ Suburb: _____

State: _____ Country: _____ Post code: _____

3. Applicant's Pioneer Ancestor(s) (Please fill in all fields)

Pioneer Ancestor - Name: _____

Place of arrival: _____ Date of arrival: ____ / ____ / ____

Name of ship: _____
OR other means of arrival in SA e.g. overland _____

4. Sponsor's Details (please fill in all fields)

Full name: _____ PASA Membership No: _____

Applicant's Relationship to the Sponsor

Child Grandchild Other: (please specify) _____

5. Junior Pioneer's Siblings (Optional)

1. Sibling name: _____ 2. Sibling name: _____

3. Sibling name: _____ 4. Sibling name: _____

6. Parent or Guardian Name, Signature and Date

Name: _____ Signature: _____ Date: ____ / ____ / ____

OFFICE USE ONLY Date application received: ____ / ____ / ____ Membership No. _____