



2018 NATIONAL CHURCH DUES (DUE DATE 28TH FEBRUARY 2018)

Church Name:

Church ID:

Entity ABN:

Church Address:

Suburb:

State:

Postcode:

Postal Address: (if different to Church)

Suburb:

State:

Postcode:

E-mail: (for business/administrative matters)

Phone:

Phone (alternative):

Dues Calculation

The below calculation is for Australian Christian Churches (ABN 58 123 514 361) National Dues. Once complete, this document forms a Recipient Created Tax Invoice (RCTI) for your records.

2017 Tithes & Offerings:

\$

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Are there other churches/campuses included in this calculation?

No

Yes (if yes, fill details below)

• Church/Campus Name (2):

Church ID (2):

• Church/Campus Name (3):

Church ID (3):

• Church/Campus Name (4):

Church ID (4):

• Church/Campus Name (5):

Church ID (5):

If more spaces are required please note these separately

2018 ACC National Dues (at 1% of 2017 Tithes & Offerings):

\$

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Do you hold an ACC Religious Group Number?

No

Yes, number:

Total Dues Payable (Add 10% GST if no Religious Group Number included):

\$

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Declaration

Does your church abide by the ACC United Constitution and Movement Policies?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Has your church adopted and implemented a current Child Protection Policy?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
If yes, date your Child Protection Policy was formally adopted:	Date:	/ /
Does your church maintain appropriate insurance including coverage for 'public liability', 'directors & officers liability' and 'sexual molestation/abuse'?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

'I declare that the above information and dues calculation are true and correct.'

Full name of Senior Pastor (or their delegate) making this Declaration:
Signature: _____ Date: / /

Dues Payable

<input type="checkbox"/> Premium Funding <i>The information included in your Dues form will be forwarded to ACS</i>	
<input type="checkbox"/> Cheque/Money Order <i>Please make payable to: Australian Christian Churches</i>	
<input type="checkbox"/> Bank Transfer	<p>Our account details Australian Christian Churches BSB: 063 146 Account Number: 1039 1792 Reference: Please enter your Church ID</p> <p>Please note: Referencing payment to Church ID is essential for tracing your payment.</p>
<input type="checkbox"/> Credit Card (max \$3,000) <input type="radio"/> Visa Card <input type="radio"/> MasterCard Amount: AUD\$ _____	
Name on Card _____	
Card Number _____	Expiry: / CVC: _____
Billing Details Address: _____	
Suburb: _____	Postcode: _____ State: _____
Country: <i>(If not Australia)</i> _____	Phone: _____
I authorise Australian Christian Churches (ABN: 58123514361) to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.	
Signature: _____	Date: / /

Submit your form to ACC

Mail PO Box 8093 Baulkham Hills BC, NSW 2153	Fax +61 2 8853-5100
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