



2019 NATIONAL CHURCH DUES (DUE DATE 28TH FEBRUARY 2019)

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.

2018 Tithes & Offerings: (1 Jan - 31 Dec 2018)	\$.
Are there other churches/campuses included in this calculation?	<input type="checkbox"/> No	<input type="checkbox"/> 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		
2019 ACC National Dues (at 1% of 2018 Tithes & Offerings):	\$.
Less 10% Discount, for payment before 28 Feb 2019:	\$.
Do you hold an ACC Religious Group Number?	<input type="checkbox"/> No	<input type="checkbox"/> Yes, number:
Total Dues Payable (Add 10% GST if no Religious Group Number included):	\$.

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
Is your church entity registered with the ACNC?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have you completed your relevant ACNC reporting, the Annual Information Statement (AIS)?	<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><small>Please note: Referencing payment to Church ID is essential for tracing your payment.</small></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