



MEMBERSHIP FORM

Please complete the form, scan and email to membership@blandfordia.org.au or post to address below.

Joint Membership covers 2 adults who use the same address. Each receives a membership card.

Regular participation in Group activities should be covered by membership, which includes insurance.

For Renewals, only record information that needs updating and your Payment Details.

YOUR DETAILS

(Joint Members: Please put both names)

First name/s _____

Surname/s _____

Address _____

Postcode : _____

Email _____ Mobile _____ Phone _____

NOTE: If your details change during your membership, please remember to update us with your new information.

MEMBERSHIP TYPE

Rates at 1 January, 2017

Tick NEW APPLICATION or RENEWING Member No. _____ Date _____

GIFT MEMBERSHIP Donor Name _____

Include any personal note with gift _____

If NEW, How did you hear about us? _____

INDIVIDUAL \$56 INDIVIDUAL CONCESSION \$48 JOINT MEMBERS \$66 JOINT CONCESSION \$58

Reason for Concession Senior/s Limited fixed income F/T student Concession ID No. _____

OPTIONAL MULTI-YEAR MEMBERSHIP I would like to renew now for the next _____ years.

OPTIONAL DONATION I would like to help APS NSG by donating the amount of \$ _____

PAYMENT METHOD I am paying my MEMBERSHIP \$ _____ + DONATION \$ _____ = TOTAL \$ _____

By DIRECT DEPOSIT BSB 062 308 - Account no. 2804 8470
Please put your name as reference and email membership@blandfordia.org.au advising details of your deposit.

OR CHEQUE payable to **Australian Plants Society - North Shore Group** (see address below)

OR CREDIT CARD MasterCard Visa Card No _____ / _____ / _____ / _____

Expiry: ____ / ____ / ____ CCV: _____ Card Holder's Name _____ Signature _____

MEMBERSHIP ENQUIRIES: Membership Officer E: membership@blandfordia.org.au Narelle Barden 0417 504 254