

## **GIFT MEMBERSHIP APPLICATION FORM**

## **MEMBERSHIP CATEGORIES AND RATES**

| Individual (within 50                                 | 0km of the GPO)  | □ 1 YR \$75     | ☐ 2 YRS \$130 |
|---|--|-----------------|---------------|
| Household (2 adults at same address)                  |  | □ 1 YR \$120    | ☐ 2 YRS \$220 |
| Country / Interstate / Overseas / Student / Pensioner |  | ner 🗌 1 YR \$55 |               |
| Student / Pensioner                                   | number   |                 |               |
| Passionate Friend*                                    |  | □ 1 YR \$130    |               |
| Platinum Friend**                                     |  | □ 1 YR \$275    |               |
| Donation to Friends                                   | Trust Fund   |                 |               |
| ** Individual membersh                                | o plus \$55 donation to Trust Fund<br>ip plus \$200 donation to Trust Fund<br>ax deductible. A receipt will be issue | d.              |               |
| GIFT RECIPIENT – CON                                  | NTACT DETAILS  |                 |               |
| Title and Full Name                                   |  |                 |               |
| Address   |  |                 |               |
|   |  |                 |               |
| Phone / Mobile  |  |                 |               |
| Email   |  |                 |               |
|   |  |                 |               |
| YOUR NAME   |  |                 |               |
| Title and Full Name                                   |  |                 |               |
| Phone / Mobile  |  |                 |               |
| Email   |  |                 |               |
|   |  |                 |               |
| PAYMENT DETAILS                                       |  |                 |               |
| Credit Card Number                                    |  |                 |               |
| Expiry Date   |  |                 |               |
| Name on Card  |  |                 |               |
| Amount  | \$ 5   | Signature       |               |

## Return this form with payment details (cheque or credit card) to:

Friends of the RBG Melbourne Inc. ABN 43 438 335 331

Gate Lodge, 100 Birdwood Avenue, Melbourne VIC 3004

T: (03) 9650 6398 E: friends@frbgmelb.org.au W: www.rbgfriendsmelbourne.org