

Membership/Renewal Form

Annual membership is \$20 per person and \$30 per family from July to June of the current year. If joining after December of the current financial year, membership for the remainder of the year is \$10.

This fee i	ncludes the quarterly CICADA CHORUS magazine.	
This is a l	New Member Renewal Member No (if applicable):	
Name:		DOB:
Address:		
Suburb: .	State:	P/C:
Phone:		
Mobile:		
Email:		
wish to p	gy half year fee \$10 yearly fee (single) \$20 yearly fe	ee (family) \$30
Date:		
	pay by: Cheque Money Order Electronic Funds Trans nake cheque payable to CICADA Queensland. If paying by E	
Account	Name: CICADA Queensland	
Bank: He	_	
BSB No: 6	No: 10416358	
	e: Your surname	
Please se	end the CICADA CHORUS magazine to me by email post	
Please do	ownload and email completed form to secretary@cicadaqld.con	n.au
Alternati	vely, you can print this form and post along with the cheque to	
Secretar	у,	
CICADA	Queensland	
Locked B	_	
Caloundra DC 4551, QLD		