

TOOWOOMBA CLIVIA SOCIETY Inc.

2020 January — December
Membership Application Form

I wish to renew my membership / become a new member

I wish to resign my membership

Membership Fees

\$30 per person with **Posted** Quarterly Newsletters (this option for existing members only).

\$ 25 Electronic (email only) copy of Newsletter

\$10 per additional person at same address

By signing below, I agree to comply with the rules of the Society

Member Details:

Please print

Name: _____

Address: _____

Phone: Home () _____ Mobile _____

Email: _____

Signature of applicant: _____ Date / /

Forward form with payment to:

The Secretary
P O Box 1679
Toowoomba BC
Qld. 4350

BANK DETAILS: Heritage Bank BSB: 638-070 Account No: 1006 1576

Please reference your name with payment.

Contact us on our website : toowoombacliviasociety.com.au