Membership Application

Date: / /
Name: _____
Address: _____
_____
Telephone: _____
***Email** (Required)**:** _____

Annual Membership fee: $10.00
A notice will be emailed annually two weeks prior to the renewal date 30th June
Payment method: EFTPOS / cash / credit card below / direct credit

Credit Card –	**Card type:**	Visa / Mastercard only
	Card number:	
	Expiry date:	
	CCV number:	
	Name on card	
	Signature	
Direct Credit -	Please remit payment to BSB: **932000** Account No: **100016306** Detail: **"Subs <Name>"**	

You can also join as a new member or renew you membership on line at:
http://armidaletreegroup.org.au//membership/

THANK YOU FOR YOUR SUPPORT!

Office use
Date processed: _____/_____/_____