

New application Renewal Gift

Member Name	Title	Given name	Family Name
Partner's Name (household only)			
Postal Address			
		Postcode	
Email Addresses	Primary	Other	
Mobile Number		Other Phone Number	

Gift memberships only

Your name

Phone Number Email

- I agree to my local ABC Friends group/branch receiving my contact details. Yes No
- I am happy to receive our national newsletters electronically (notice via email and electronic link).
If you tick 'No' you will receive printed copies in the post. Yes No
- I am happy to receive occasional emails about ABC Friends' campaigns and activities. Yes No

MEMBERSHIP

Membership Type

- Individual 1 year – \$30 3 years – \$80
- Household / Organisation 1 year – \$50 3 years – \$120
- Concession / Low income 1 year – \$20 3 years – \$50

DONATION

I would like to make a donation of \$

Donations are not tax-deductible

Total Payment: \$

Payment Method

- Visa MasterCard Money Order Cheque in favour of Friends of the ABC (NSW) Inc.

Card Number / / /

Name on Card

Expiry Date / CVV Today's Date / /

To send directly via email - save this form to your desktop or a folder and then close your web browser. Locate the form on your computer then click [here](#) to email it to ABC Friends as an attachment.

Otherwise send to: membership_nswact@abcfriends.net.au

or post to: **ABC Friends NSW & ACT PO Box 1391, North Sydney NSW 2059**