## The Friends of the Botanic Gardens of Adelaide Inc.

## **2020 MEMBERSHIP FORM**

ABN 66 133 016 528

Membership details: MembNo or (New)		
Name/s		
PhoneMobileMobile		
Address		
Email		
To save on postage please send my Newsletter & information BY EMA I am interested in becoming a VOLUNTEER (Volunteer information will		
Annual Membership subscription (please circle amount):	Aus\$	Age Group
Single Single Concession pensioner, student, unemployed Joint 2 adults, same mailing address Joint Concession 2 adults same mailing address Family 2 adults, children under 18 Institution	\$45.00 \$40.00 \$50.00 \$45.00 \$55.00 \$60.00	□ 18-35 □ 36-49 □ 50-65
I wish to make a <b>DONATION</b> of	\$ \$	□ 66-75
All Donations are Tax Deductible	TOTAL \$	Over 75
Payment Type: Credit Card/ Cheque/ Money Order/ FBGA Acco	ount Direct Payn	nent/ Cash
BSB: 105157 Account No: 586057340 Bank's Reference: Member No, Full Name		
☐ Credit Card: Mastercard /VISA (please circle)		
Card Number: Expiry date: /		
Cardholder's name:Cardholder's signature:		
☐ Cheque: payable to: Friends of the Botanic Gardens of Adelaide.		
Please return Completed Membership Form to FBGA Office  Post to:  Membership, Friends of the Botanic Gardens of Adelaide, Adelaide Botanic Gardens  Or Scan to: friendsabg@internode.on.net  Fax to: (08) 8222 939		
Office: Ph: 08 8222 9367, Email: <u>friendsabg@internode.on.net</u> , Web: <u>www.friendsbgadelaide.com</u>		
2020 Membership Renewal Card will be mailed with the	e next Gazette.	