 MEMBERSHIP FORM

Single - $10 per year

PO Box 516

Wee Waa NSW

Email: namoiechomuseum@gmail.com

|  |
| --- |
| NAME: |
| ADDRESS: |
| PHONE: |
| EMAIL: |
| PAYMENT: | $10 |
| DONATION: |  |
| TOTAL: |  |
| SIGNATURE: |
| I WOULD LIKE TO RECEIVE THE NEWSLETTER **POSTED/EMAILED** TO THE ABOVE ADDRESS YES/NO |
| **FOR NEW MEMBER** |
| SIGNATURE OF PROPOSING MEMBER |
| OFFICE USE |  |
| RECEIPT NO: |  |
| PAYMENT BY DIRECT DEBIT TO ACCOUNT: BSB 012-865ACCOUNT NO: 2 3484 5057 |  |
| REFERENCE USED: |  |