Membership Application

PERMACULTURE MELBOURNE

ABN 66 567 350 927

Incomplete or illegible order forms cannot be processed. Please send any enquiries to membership@permaculturemelbourne.org.au or phone 03 9513 4447

Return completed Membership form with payment to Permaculture Melbourne postal address or your Local Group contact

I / we apply for membership of Permaculture Melbourne Incorporated

Name of Applicant .....
(Nominee if an Organisation)

Organisation (where applicable).....

Name(s) of Extra Person(s) at same address.....
.....

Mailing Address .....

Suburb .....

Post Code.....State.....

Phone.....Mobile.....

Email.....

Please email my bi-monthly newsletter of PIE ☐ Please email my local group(s) news ☐

Mail Payment to

Permaculture Melbourne
P.O Box 3020
Auburn
3123 Victoria

Local group OR

Category	*Subscription*
Regular 1yr	$32.00
Regular 2yrs	$60.00
Concession 1yr	$24.00
Concession 2yrs	$44.00
Extra person(s) at same address 1yr	$12 per person
Extra person(s) at same address 2yrs	$20 per person

Membership Subscription	$
Extra Person(s), same address, no PIE	$
Mountain Districts Newsletter 1yr $5.00 2yrs $10.00	$
Otways & Coast Newsletter 1yr $2.00 2yrs $4.00	$
Donation to Permaculture Melbourne **$5 $10 $25 $50 Other**	$
Donation to Local Group amount **$5 $10 $25 $50 Other**	$
Total enclosed	$

Cheques and/or Money Orders to be made out to Permaculture Melbourne in AUD or to your local group (details supplied by local group)

Money order ☐ Cheque ☐ Cash ☐ Credit Card ☐ *(visa/mastercard/bankcard ONLY)*

All Credit Card payments to be paid directly to Permaculture Melbourne and not through a local group

Name (as it appears on card).....

Credit Card Number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry Date ☐☐ / ☐☐

Signature of cardholder.....

In the event of my/our admission to membership, I/we agree to be bound by the Rules of the Association for the time being in force.

Signature.....date.....

Office Use

Retained by PcM Admin

Forwarded to Local Group

Date

Retained by Local Group

Forwarded to PcM Admin

Date

Signature of Membership Officer.....

Signature of Local Group Membership Officer.....