



**BATCHELOR MUSEUM DEVELOPMENT ASSOCIATION INC. MEMBERSHIP APPLICATION FORM**

I /we wish to apply to join the Batchelor Museum Development Association Inc.

Membership valid to 30 June 2013

Mr  Mrs  Ms  Miss  Dr  Other .....

Member 1 - First Name: ..... Surname: .....

Member 2 - First Name: ..... Surname: .....

Postal Address: .....

State: .....Postcode: ..... Country: .....

Email Address: .....

Phone: (Home) ..... (Mobile) .....

**Children as part of Family Membership**

First Name: ..... Surname: .....

First Name: ..... Surname: .....

Please Tick Membership Category: One Year Individual \$25.00  One Year Family \$45.00

Single Life Membership Platinum \$1000.00  Single Life Membership Gold \$500.00

Single Life Membership Silver \$250.00  Life memberships will be noted on our website. I would like to be listed on the membership page of the Batchelor Museum Development Association Inc. website Yes  No

I would like to pay the Life Membership accumulatively over 5 consecutive payments Yes  {You will be contacted and advised details of payment procedure}

Life memberships will be noted on our website or opt out if you wish.

Payments will be receipted as a donation and eligible for tax deduction.

Signed: ..... Date: .....

I enclose a cheque/money order made payable to Batchelor Museum Development Association Inc.

**OR**

I have made Payment directly to Batchelor Museum Development Association Inc.

**Bank Account Details Account: Batchelor Museum Development Inc.**

**Bank: Bendigo Bank BSB: 633 000 Account Number: 141 722 124**

Note: please add a reference using Member 1. "surname"

**YOU WILL ALSO NEED TO PRINT AND SEND THIS FORM COMPLETED TO:**

BATCHELOR MUSEUM DEVELOPMENT ASSOCIATION INC. PO BOX 954 DARWIN 0801

*MEMBERSHIP APPLICATION PROPOSER AND SECONDER WILL BE PROVIDED BY THE COMMITTEE*