



MEMBERSHIP RENEWAL FORM

For year commencing 1 April 2021

Australian War Widows NSW thanks you for renewing your membership. We respect your privacy and will not divulge personal information to external people/organisations without permission. Please use **BLOCK LETTERS**.

Personal Info		Membership no.	
Surname			
Given Names			
Pref. Name	Date of Birth	/	/
Address			
Suburb	Post Code		
Mobile	Home phone		
Email			

Alternate Contact - Please advise this person that you have provided us with this information

Name			
Relationship to you			
Address			
Mobile	Email:		

Declaration

I, _____ hereby apply to renew my membership of the Australian War Widows NSW and agree to continue to be bound by the rules of the organisation current at the time.

Signature	Date: / /
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Membership options

Your annual membership subscription commences 1 April 2021.

1 year subscription	3 year subscription
<input type="checkbox"/> \$30.00	<input type="checkbox"/> \$85.00

Direct Deposit Details: Account Name: WestPac Banking Corporation, War Widows Guild of Australia NSW Ltd
BSB: 032 000 Account Number: 941 560 *Please attach copy of receipt

Donations (tax deductible)

I would also like to make a tax-deductible donation to support the Australian War Widows NSW:

\$10 \$20 \$50 _____ (other amount). Please debit my credit card details as below.

TOTAL	\$
<input type="checkbox"/>	I enclose a Cheque/Money Order payable to: Australian War Widows NSW Ltd OR
<input type="checkbox"/>	Please charge my: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa

Card Number: ____ / ____ / ____ / ____	Expiry: ____ / ____
Name on card:	CVV: _____
Cardholder Signature:	

Please return your completed form to: Australian War Widows NSW
Suite 1.01, Level 1, 9 Help Street, Chatswood NSW 2067