

**MEMBERSHIP SUBSCRIPTION 2008–2009**

Surname: .....Given names: .....

Address.....Postcode: .....

Phone: ..... Mobile: .....

Email: .....

**Please tick appropriate box**

Family  Volunteer  Interested Other

Children's Names - *(To be completed by families)* .....

*The data above is requested to ensure that Extended Families database is accurate, and will not be used for any purposes other than as required by EFA to provide a service.*

The amount of the membership fee is: *Please tick appropriate box*

Families (per family) \$10.00  Volunteer / Friends of EFA (per person) \$ 5.00

Individual membership (Interested Person or Organisation) \$10.00

Donation to EFA \$..... All donations over \$2.00 to Extended Families Australia are Tax Deductible

**Payment** \$\_\_\_\_\_ **Total Amount**

I enclose cheque/money order made payable to Extended Families Australia Inc. or

**Please debit my credit card as follows:**

Visa  Bankcard  Mastercard

Card No:     Expiry Date:  /

Name on Card: ..... Signature:.....

Thank you for paying your membership and for supporting your organisation, Extended Families Australia.

**Please return to: Extended Families Australia, 177 Glenroy Rd, Glenroy. 3046**