

Bankstown Orchid Society Inc.

PO Box 324 Chester Hill NSW 2162
Phone 9796 1038

Membership Application Form

I would like to be a member of the Bankstown Orchid Society (Inc.) and agree to abide by its rules and regulations. I enclose (tick one)

- | | | |
|--------------------------|------------------|--------|
| <input type="checkbox"/> | Family | \$8.00 |
| <input type="checkbox"/> | Couple | \$7.00 |
| <input type="checkbox"/> | Single | \$6.00 |
| <input type="checkbox"/> | Pensioner Couple | \$6.00 |
| <input type="checkbox"/> | Over 80 years | Free |
| <input type="checkbox"/> | Junior | \$1.00 |

(Subscriptions renewable 1st July each year)

Name:

Street:

Suburb: State:

Postcode: Contact Phone:

Fax/Email:

Signed:

Please print out and post with your subscription, cheques to be made payable to "Bankstown Orchid Society Inc."

Bankstown Orchid Society Inc.
PO Box 324
CHESTER HILL NSW 2162

Alternatively you can bring along to the next meeting and give to Mrs Doris Scott.