

MEMBERSHIP APPLICATION

I would like to become a member of *Friends of Cape Schanck Inc.* My personal details are to be used solely for the purposes of *Friends of Cape Schanck Inc.*

Personal Details (Please print in block letters)	
Name:	
Postal Address:	
Postcode:	
Home Address (if different from above):	
Postcode:	
Phone: (Home) (Mobile)	
Email:	
Signature:Date:	
Membership Subscription Options:	
Family Membership: a. I Year Membership - \$50	
b. 2 Year Membership - \$80	
c. 5 Year Membership - \$150	
2. Single Membership:a. 1 Year Membership - \$30	
b. 2 Year Membership - \$50	
c. 5 Year Membership - \$100 🗔	
(Please tick as appropriate)	
Direct Deposit to:	
Friends of Cape Schanck, Bendigo Bank BSB# 633000 Account# 159289727	
Membership Enquiries:	
Chris England: Tel: 0409772115 or email: chrisengland1@hotmail.com	

Completed Membership Applications to:

- Scanned copy (much preferred) to: chrisengland1@hotmail.com or uploaded via the website contact page
- Hard copy to: 41 Bass Vista Boulevard, Cape Schanck