

INDIVIDUAL MEMBERSHIP RENEWAL 2020 – 2021

Tax Invoice- No GST is applicable. Please complete the following sections, retain a copy for your records and **return the completed form with your payment for our records**

TITLE: Dr Ms Mrs Miss Other (Please state)

NAME:

MAILING ADDRESS:

Postcode

PHONE:

M:

EMAIL:

Contact in case of emergency: Name:

Telephone:

PRESENT/FORMER OCCUPATION:

FEES FOR 2020– 2021: (Please circle/highlight the appropriate category)

A. Individual Member \$80 B. Individual Member (Concession) \$60
C: Young NCWVic \$30

DONATION

I would like to give a Donation towards NCWV work. \$

Towards 'Civics and Citizenship' Fund for work with YoungNCWV \$

Are you happy to receive the NCWV materials by email? Yes No

Are you willing for your name/image to appear in our publications? Yes No

To comply with the Commonwealth Privacy Act, I hereby give permission for NCWV to include the above details in the database which is maintained for the sole purpose of conducting the business of NCWV. I understand that my contact details will not be given to a third party without my express permission, and that we will not give members' contact details to a third party without those members' express permission

Signature:

Return this form to the postal address or email to: info@ncwvic.org.au

A cheque for \$ _____ is enclosed OR Electronic Transfer of \$ _____ to:

Account name: National Council of Women of Victoria Inc.

Bank: WESTPAC 263 Victoria Street Abbotsford 3067

BSB: 033 031

Account Number: 263920

Reference: Please provide your last name and initial and word - Membership

OFFICE USE ONLY: Receipt No. _____ Date _____