

# Membership Form

## Friends of Lake Claremont

Please return the completed form by post or email:

PO Box 837  
Claremont  
WA 6910

folc.wa@gmail.com



Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

Individual:  1 Yr - \$10      Family:  1 Yr - \$20  
 2 Yr - \$20                       2 Yr - \$40  
 5 Yr - \$50                           5 Yr - \$100

If you opt to pay for multiple years we will not have to contact you for renewal every year

Tax Deductible Donation:  \$\_\_\_\_\_ Any additional support would be much appreciated

Total: \$\_\_\_\_\_

Please fill in this section if you are a new member or any of your details have changed in the past year

### Individual Member Details:

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mobile: \_\_\_\_\_

### Additional Family Members:

Name: \_\_\_\_\_

### Emergency Contact in case of illness or injury:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Name: \_\_\_\_\_

Tick if you would like to volunteer in one or more of the following areas and we will get in contact with you

- |   |                                      |   |
|---|--------------------------------------|---|
| <input type="checkbox"/> Weeding                    | <input type="checkbox"/> Planting    | <input type="checkbox"/> Designing Posters / Displays |
| <input type="checkbox"/> Special Event Coordination | <input type="checkbox"/> Photography | <input type="checkbox"/> Other _____                  |

### Payment Details:

Method:  Cash Enclosed  
 Cheque \*  
 EFT

### EFT Details:

**BSB:** 036-034  
**Account Number:** 339226  
**Reference:** Your Surname

\* Please make cheque out to  
'Friends of Lake Claremont Ltd'