

MEMBERSHIP RENEWAL

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PERSONAL DETAILS

NAME (Mr/Miss/Mrs/Ms)

POSTAL ADDRESS

HOME PHONE NUMBER

MOBILE PHONE NUMBER

EMAIL ADDRESS

NEXT OF KIN NAME

NEXT OF KIN CONTACT NUMBER

MEMBERSHIP DETAILS

I WOULD LIKE TO
BECOME A FRIEND
FOR \$20
(ANNUAL FEE)

I WOULD LIKE TO MAKE A TAX-DEDUCTIBLE DONATION IN
ADDITION TO BECOMING A FRIEND. DONATION:

\$50.00

\$100.00

\$150.00

OTHER:

WOULD YOU LIKE TO
VOLUNTEER AT THE
EMPIRE THIS YEAR?

YES

NO

PAYMENT DETAILS

DATE

CASH

CHEQUE

CARD TYPE

PROCESSED BY

VISA

MASTERCARD

EFTPOS

NAME ON CARD

CARD NUMBER

EXPIRY

CVC

SIGNATURE