

FRIENDS of the AUSTRALIAN NATIONAL BOTANIC GARDENS

MEMBERSHIP APPLICATION FORM

Please send completed applications to: Membership Secretary, Friends of the ANBG, GPO Box 1777, Canberra, A.C.T., 2601
(or place in the Friends Mail Box at the Visitor Centre)

MEMBERSHIP DETAILS

Mr Mrs Ms Miss Other _____

Given Names _____

Family Name _____

Address _____

State _____ Postcode _____

Phone (____) _____

Mobile _____

METHOD OF PAYMENT

Cash Cheque Money Order Credit Card

Amount Enclosed \$ _____

Cheques/Money Orders should be payable to:
'Friends of the ANBG'

Please debit my Mastercard Visa

____ / ____ / ____ / ____

Signature _____

Exp Date ____/____

Print Name as on Card :

MEMBERSHIP PERIOD

(from 1 November each year, with memberships after
1 August valid to 1 November the following year)

(Please tick only one box)

For One Year Membership

Household \$60.00

BIG \$60.00

Individual \$45.00

Concession \$40.00

For Two Year Membership

Household \$110.00

BIG \$110.00

Individual \$80.00

Concession \$70.00

For Five Year Membership

Household \$240.00

BIG \$240.00

Individual \$180.00

Concession \$160.00

GIFT SUBSCRIPTION

**Please supply the following information.
Any message (see below) will be included on
a gift card.**

Gift subscription for:

Mr Mrs Ms Miss Other _____

Given Names _____

Family Name _____

Address _____

State _____ Postcode _____

Phone (____) _____

Mobile _____

Message: _____

From:

Name _____

Contact _____

**Please complete payment details, membership
type and duration in previous sections**