

APPLICATION FOR MEMBERSHIP
PHILLIP ISLAND & DISTRICT HISTORICAL SOCIETY INC

Full name:

Date of birth:

Residential Address:

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.....Postcode.....

Email:.....

Postal Address (if different from above):

.....

.....Postcode

Telephone contact:.....

Do you wish to receive minutes by e-mail Yes No

Signature:.....Date:.....

Your contact details will not be divulged to outside organisations without your authority.

Your name and contact details may be released to other members of the Society (unless you notify us to the contrary).

Print off form and Return with fee (cheque/money order) or direct credit - BSB 633-000
A/C # 151829389 A/C NAME: Phillip Island & District Historical Society Inc General
Account BANK: Bendigo Bank with your surname in the reference space.

Christine Grayden, Secretary, PO Box 816, COWES, 3922.

Annual membership fee

Single \$30.00

Family \$35.00