

# Membership application



## Tax Invoice/Application for Membership 2015/2016

Membership year is 1 July 2015 to 30 June 2016

## Landcare Association of South Australia Inc

ABN 20 341 395 200

Treasurer: Don Cranwell, PO Box 62, Basket Range, SA 5138

P: 08 8390 1250 M: 0407 728 878

E: Treasurer@landcaresa.asn.au

### MEMBER PERSONAL INFORMATION (Please print clearly)

Last Name: ..... First Name: .....

Home Address: .....

..... Post Code: .....

Postal Address (if different to Home Address): .....

..... Post Code: .....

Phone: (H) ..... (W) ..... (M) .....

Email Address: .....

NRM Region: .....

Landcare, Industry or Community NRM Group: .....

### MEMBERSHIP CATEGORIES AND FEE (Please tick one)

Individual Membership – \$20       Group Membership – \$50

Donation \$..... (please record amount here)

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

### CONSENT OF PARENT / GUARDIAN (required if the member is under 18 years of age at 1 July 2015)

I, ....., (name of parent/guardian)  
of ..... (address)  
am the parent/guardian of ..... (name)  
who is under 18 years of age, hereby consent to and confirm this application for membership.

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

### The MEMBERSHIP FEE is payable NOW

Please tick this box if you would like to receive a receipt by post

The following options are available for payment of your fees, or if you wish to make a donation: (Please tick one)

**Pay your fees in person**

At:  
MPNRC, 132 Melrose St, Mt Pleasant, Ph 8568 1907

**Post a Cheque together with this form to:**

The Treasurer, Don Cranwell, LASA Inc,  
PO Box 62, Basket Range  
South Australia 5138

**Use Direct Debit**

**BSB No:** 105-094 **Account No:** 026879440  
**Reference field:** For example: JR Citizen LASA.  
Please use your initials and last name and 'LASA' to confirm you have paid your fees and we can receipt your payment.  
**Return this form by post or email:**  
The Treasurer, Don Cranwell, LASA Inc,  
PO Box 62, Basket Range, SA 5138  
Email: Treasurer@landcaresa.asn.au

| OFFICE USE:   |   |             |                  |
|---|---|-------------|------------------|
| Invoice No:   | Receipt No:   | NRM Region: | Community Group: |
| Invoice amount:   | Received \$:  | Chq/Cash:   | Reference:       |
| <input type="checkbox"/> Individual<br><input type="checkbox"/> Group | <input type="checkbox"/> Corporate<br><input type="checkbox"/> Donation | Address:    | Email:           |