



QUILTERS' GUILD OF SOUTH AUSTRALIA INC
INDIVIDUAL MEMBERSHIP APPLICATION
TAX INVOICE

Mrs/Miss/Ms/Mr: _____
 Please print clearly Given names LAST name

(Tick as applicable) **New member** [] **OR** **Renewal** [] **Membership Number:** _____

Postal Address: _____
 _____ **State** _____ **Postcode** _____

Telephone: (Home) _____ **(Mobile)** _____

Email address: _____

Are you a Quilt related Business Owner? **Y/N. Business Name:** _____

Please note that your name and contact details may be published in *Patches*, and / or forwarded to other quilt-related organisations. If you **DO NOT** give permission for this, please sign here:

Membership fees are DUE on July 1st each year

Membership fee	\$60.00	\$
Discount if paid by August 31st	\$10.00	\$
Junior Member (under 18 years of age: or full-time student to 25 years)	\$20.00	\$
Associate Member at the same address (no <i>Patches</i>)	\$30.00	\$
TOTAL DUE		

<p><u>For office use only</u></p> <p>Membership number _____</p> <p>Receipt number _____</p> <p>Date entered _____</p>	<p><u>Direct Deposit banking details</u></p> <p>Bank: BankSA BSB: 105-051</p> <p>Account number: 207 144 540</p> <p>Account name: Quilters Guild of SA Inc.</p> <p>Reference: Name and Membership number</p> <p>Transaction Date: _____</p>
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Payment by: Cash; Cheque; Money order; Mastercard; Visa; Direct Deposit.

Card Number: _____: _____: _____: _____ Expiry date ____: ____

Cardholder's name: (please print) _____

Signature: (for Credit Card) _____

(V05/15)

<p><u>Check list before posting</u></p> <p>Cheque / money order / CC details included <input type="checkbox"/></p> <p>Membership form <input type="checkbox"/></p> <p>SSAE for return of receipt/membership card <input type="checkbox"/></p>	<p>Send to:</p> <p align="center">The Treasurer Quilters' Guild of SA Inc. PO Box 993 KENT TOWN SA 5071</p>
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