



Meredith Anne Rundell Inc.



Membership

- I would like to apply for membership
- I would like to renew my membership - Membership Number _____

Name/organisation: _____ Phone: _____ Mobile: _____

Address: _____

Email: _____ Date of Birth ____/____/____ (01/01/2010)

Signature _____ Date: ____/____/____

Donation \$ _____

Donations are welcome:

Cheque – payable to 'Meredith Anne Rundell Foundation Inc'.

Direct Deposit – BSB

Please Quote Name, Organisation or membership

Office Use Only

Proposed by _____

Seconded by _____

Receipt Number _____ Date _____