

Membership Application

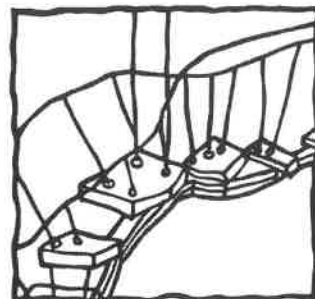
ARTS PROJECT AUSTRALIA

APPLICATION FOR MEMBERSHIP OF
ARTS PROJECT AUSTRALIA

I,(name)

of

.....(address)



desire to become a member of ARTS PROJECT AUSTRALIA

In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

Signature of Applicant _____ Date _____

Email Phone Mobile

Donation

Please include a tax deductible donation to support the artists at Arts Project Australia

\$30 ☐ \$50 ☐ \$100 ☐ \$500 ☐ My choice of \$ _____

Monthly Giving Program

I would like to join Arts Project Australia's Monthly Giving Program. I would like to make a monthly tax deductible donation to support the artists at Arts Project Australia of:

\$10 ☐ \$20 ☐ \$30 ☐ \$50 ☐ My choice of \$ _____

Request Information about making a Bequest

☐ I am interested in remembering Arts Project Australia in my will and would like more information about leaving a bequest.

My total contribution

Membership Fee \$ _____

☐ Visa ☐ Mastercard

Donation \$ _____

☐ Cheque ☐ Money Order

Monthly Gift \$ _____

Total \$ _____

Signed _____

Name on Card _____ Expiry ☐☐☐☐Card Number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐Office Use: ☐ Credit Card processed☐ Tessera Entered☐ Etools entered☐ MYOB Processed

PROCESSED APRIL 2015