



BOTANIC GARDENS AUSTRALIA AND NEW ZEALAND INC
INDIVIDUAL membership application
(if membership renewal please fill in membership number)

CONTACT DETAILS

MR MRS MS MISS OTHER _____

FIRST NAME _____

SURNAME _____

POSTAL ADDRESS _____

STATE _____ POSTCODE _____

TELEPHONE (H) _____

TELEPHONE (W) _____

FACSIMILE _____

EMAIL _____

OCCUPATION

- Paid employment Own business
 Retired Full-time student
 Volunteer

ORGANISATION _____

POSITION _____

ADDRESS _____

STATE _____ POSTCODE _____

MEMBERSHIP FEE

- Individual \$ 60
 Student, pensioner or senior \$ 40

Membership fees may be tax deductible
(refer to your tax agent for details).

**Please include confirmation of your
concession status: student/ pension/seniors
card number or letter stating your status
from a supervisor.**

PAYMENT DETAILS

Membership Number (renewals only) _____

Membership fee \$ _____

Payment may be made via

Direct Deposit

BSB: 082 980 Account: 59179 6265
(please include your membership number or
name

OR

Credit Card (Amex and Diners Club facility not
available.)

Visa Mastercard

CARD NUMBER _____

EXPIRY DATE _____

CARDHOLDER'S NAME _____

SIGNATURE _____

OR

Cheques/money orders made payable to:
Botanic Gardens Australia and New Zealand

Send to: BGANZ Secretariat
GPO Box 1777, Canberra, ACT 2601

A tax invoice/receipt will be issued after
processing.

**Membership fees may be tax deductible (refer
to your tax agent for details).**

DECLARATION

In applying to become a member of BGANZ Inc,
we agree to subscribe to the objects of the
Association and comply with the rules governing
membership as shown in the Constitution.
The BGANZ Constitution is available on the
website: www.bganz.org or from the Secretariat.

NAME _____

SIGNATURE _____

DATE _____