MEMBERSHIP APPLICATION/RENEWAL FORM

PLEASE PRINT CLEARLY

Date .....
Are you a: New Member ☐ Renewing Member ☐
Name
.....
Email .....

Phone (Landline) ( ) ..... **Phone (Mob)** .....
Website URL .....
Facebook Page .....
Address .....
.....
Suburb ..... **State** .....
Postcode ..... **Country** (if outside Australia) .....
Name of Company (if Company Membership?) .....
(Optional) ☐ Please send my magazine by post

Are you a Musician? If so, please list your band(s), website(s), Facebook page(s) below
Band Name .....
Band Website .....
Band Facebook Page .....

Age Group Under 30 ☐ 30-40 ☐ 41-50 ☐ 51-60 ☐ Over 60 ☐
How did you hear about us?

Are you joining as a Volunteer? ☐

CHOOSE YOUR MEMBERSHIP OPTION		
Member	.....	**$ 50.00** ☐
Student Supporter	.....	***$ 25.00*** ☐
Corporate Partner	**Name of Organisation**	**$ 250.00** ☐
Financial Donation	*All donations of $2.00 or more to the Australian Jazz Museum are tax-deductible (not applicable to membership subscriptions)*	**$**
TOTAL		**$**

PAYMENT DETAILS

☐ Cheque ☐ Money Order ☐ MasterCard ☐ VISA

Card Number: __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __
Expiry Date: __ __ / __ __ Card Holder Name:
Card Holder Signature:

Cheques should be made payable to: The Australian Jazz Museum

Australian Jazz Museum P.O. Box 6007 Wantirna Mall, VIC 3152, Australia

OFFICE USE ONLY
RECEIPT NO. ..... DATE: .....
MEMBERSHIP NO. ..... VALID TO: .....

Letter/card sent out/taken (date) .....
CD sent out (date) .....