NATIONAL TRUST *of* AUSTRALIA (VICTORIA)
ABN 61 004 356 192,

MEMBERSHIP APPLICATION

TO JOIN THE NATIONAL TRUST PLEASE DOWNLOAD THIS MEMBERSHIP APPLCATION AND FORWARD THE COMPLETED FORM, WITH YOUR PAYMENT TO:

Membership Department
The National Trust of Australia (Victoria)
4 Parliament Place, East Melbourne Vic 3002
Or to Fax: 03 9650 5397

PERSONAL DETAILS
To be completed by new member(s) BLOCK LETTERS PLEASE

NOTE: Household memberships cover two named adults (plus children under 18). Please enter the details of each adult in the spaces provided below

1. **NAME OF SINGLE MEMBER OR FIRST HOUSEHOLD MEMBER**

Dr/Mr/Mrs/Ms/Miss_____ Given Name_____
(Surname)

ADDRESS_____Postcode _____

2. **NAME OF SECOND HOUSEHOLD MEMBER**

Dr/Mr/Mrs/Ms/Miss_____ Given Name_____
(Surname)

Telephone (H): ( ) _____ Telephone(B): ( ) _____Mobile: _____

Email address:_____ D.O.B _____
I confirm I wish to receive updates and information on Trust activities via email.

Occupation_____ Pension/Student No. _____

CHILDREN'S NAMES
Child 1_____Date of Birth_____ Child 2_____Date of Birth_____

Child 3_____Date of Birth_____ Child 4_____Date of Birth_____

MEMBERSHIP CATEGORIES (*Please tick)*

Individual	*(Covers 1 named adult)*	$56	
Household	*(Covers 2 named adults and 4 or fewer children)*	$80	
Single Concession	*(Covers 1 fulltime student or pensioner)*		$41
Household Concession	(*Covers fulltime students or pensioners)*	$56	
Joining Fee		**$33**	
TOTAL PAYMENT including joining fee		**$____**	

PAYMENT DETAILS

Herewith: Cash Cheque/money Order
Or charge Visa/MC Amex Diners
|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

INTERESTS

Trust Connections (Social Group) Events
Wills and Bequests
Volunteering Gift Membership
Activities Committee Life Membership
Children's Activities / Events

For 1 year of membership Each year until further notice
Cardholder name_____
Card expiry date_____
Signature_____