

# NATIONAL TRUST MEMBERSHIP APPLICATION FORM



**Member Application for:** (please tick one)

- Personal Membership  
 Gift Membership (from ..... ph:.....)

**MR MRS MS MISS DR Other:** \_\_\_\_\_ (Joint memberships fill in Member 1 & 2)

**Member 1) First Name:** ..... **Surname:** .....

**Member 2) First Name:** ..... **Surname:** .....

**Address:**..... **Postcode:**.....

**Phone: (Home):**..... **(Work):**..... **(Mobile):**.....

**Email Address:**.....

**Student/Pensioner/Senior's Card number(s) for Concession memberships** ...../.....

**Date(s) of Birth:** ..... / ..... **Occupation:** .....

**Children under 18** (as part of Family membership - up to 4 children)

First Name:..... Surname:..... Date of Birth:.....  
 First Name:..... Surname:..... Date of Birth:.....  
 First Name:..... Surname:..... Date of Birth:.....  
 First Name:..... Surname:..... Date of Birth:.....

**PLEASE TICK MEMBERSHIP CATEGORY** (prices include GST)

	<b>1 Year</b>	<b>3 Year (10% discount)</b>
<b>Individual</b>	<input type="checkbox"/> \$65	<input type="checkbox"/> \$176
<b>Joint</b> (2 adults)	<input type="checkbox"/> \$95	<input type="checkbox"/> \$257
<b>Family</b> (2 adults & up to 4 children under 18)	<input type="checkbox"/> \$95	<input type="checkbox"/> \$257
<b>Individual Concession</b> (students/pensioners/Seniors Card )	<input type="checkbox"/> \$45	<input type="checkbox"/> \$122
<b>Joint Concession</b> (students/pensioners/Seniors Cards – both members must have a concession card )	<input type="checkbox"/> \$68	<input type="checkbox"/> \$184
<b>Affiliated Membership</b> (libraries/historical societies etc)	<input type="checkbox"/> \$95	N/A

**PLUS joining fee** (payable first year only to cover administration costs) – \$33 all categories

Membership fee	\$ _____
Joining fee	\$ _____
Donation (Tax-deductible if over \$2)	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

I enclose a cheque/money order made payable to the 'National Trust of Australia (NSW)'

**OR**

**Please debit my credit card:** MasterCard  Visa  Amex  Diners Club

**Card number:**

**Expiry date:**     **Name on Card:** .....

**Cardholder's signature:** .....

**PLEASE PRINT AND SEND COMPLETED FORM TO: MEMBERSHIP DEPARTMENT, NATIONAL TRUST OF AUSTRALIA (NSW) GPO BOX 518, SYDNEY NSW 2001 OR FAX TO: (02) 9252 1264**

*For automatic direct debit from your credit card or bank account please download and complete a Direct Debit Form and send it in along with this form.*