



New Mardi Gras

MEMBERSHIP APPLICATION

MY DETAILS		
Title <input type="checkbox"/> MR <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Other _____		
First name	Surname	
Date of birth ___ / ___ / _____		
Address		
	Postcode	Country
Home phone ()	Mobile	
Email address		
<input type="checkbox"/> Yes, I have provided my email address to ensure I receive news, updates and official notifications from New Mardi Gras		
<input type="checkbox"/> I would like to be contacted about volunteering for New Mardi Gras		

MEMBERSHIP CATEGORY	
Please choose the applicable membership category below. Note that the 3 year option is only available to Full members.	
<input type="checkbox"/> Full (1 year) = \$45*	<input type="checkbox"/> Full (3 years) = \$110*
<input type="checkbox"/> Under 25's (1 year) = \$25*	<input type="checkbox"/> Concession (1 year) = \$25* Concession card number:
<input type="checkbox"/> International (1 year) = \$25*	<input type="checkbox"/> Organisational (1 year) = \$100*
I would also like to make a donation of \$ _____ Please note donations are not tax deductible	
* Inclusive of GST. The membership year runs from 1 November to 31 October.	

PAYMENT METHOD	
Tax invoice New Mardi Gras Ltd ABN 87 102 451 785 Cheque / money order: Please post completed form and cheque or money order made out to New Mardi Gras to: New Mardi Gras, Suite 6, 94 Oxford Street, Darlinghurst, NSW 2010, Australia. Credit card payment: Fax completed form to +61 2 9383 0966 or mail to the address above.	<input type="checkbox"/> Cheque <input type="checkbox"/> Money order <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa
	Credit card number _____
	Expiry date ___ / ___
	Cardholders name
	Signature
	Today's date ___ / ___ / _____

MEMBERSHIP DECLARATION	
I would like to apply to become a member of New Mardi Gras. I agree to support the aims and objectives of New Mardi Gras and be bound by the rules as outlined in the constitution, a copy of which can be found at www.mardigras.org.au	
Signature	Date

PRIVACY STATEMENT
<i>The personal information we collect on this form will be used only by New Mardi Gras to process and maintain your membership. It may be disclosed to service providers who do things on our behalf (e.g. mailing house) or to other third parties where it is required or allowed by law or where you have otherwise consented. You can access the information we have collected, if we have retained it, by contacting New Mardi Gras. Please tick the box if you DO NOT wish to receive correspondence from us via <input type="checkbox"/> mail, <input type="checkbox"/> telephone, <input type="checkbox"/> email.</i>

Office use only		
Admitted	Payment processed	Membership number