

MEMBERSHIP RENEWAL & DATA UPDATE FORM

I/We being financial member/s of the Mudgeeraba Show Society Inc, and by signing below and payment of Membership Fees, I/we agree to continue to be bound by the Society's Rules, By-Laws and Constitution for the term of our Membership.

Single Member's Full Name: _____

Family Member - Family Name: _____

Adult or Carer's First Name/s: _____; and: _____

Child's Name: _____ D.O.B _____

Child's Name: _____ D.O.B _____

Child's Name: _____ D.O.B _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Postal Address: _____

Suburb: _____ Postcode: _____

Signature: _____ **Date:** _____

Please note: Once a child reaches 17 years they will need to apply to become a single member.

Annual Membership Fees are due for Payment following the Society's AGM in October.

BSB: 633-108 - Acct No: 1425 34247 - Acct Name: Mudgeeraba Show Society

Please list your last name as reference when paying by EFT.

Annual Membership Subscription Fees, please circle: _____ \$45 Family _____ \$25 Single

Office Use:

Date Paid	Eftpos	Cash/Cheque, Receipt No:	Bank Transfer
Badge sent:		Date entered on Members list:	

Contact Details: The Secretary/Manager, Mudgeeraba Show Society Inc
Business Telephone: 0755 302754 Mobile: 0418 182 533
Email Address: admin@mudgeerabashow.org.au
All Correspondence to: PO Box 150 Mudgeeraba, Qld. 4213

