



Renewal of Membership of Association 2018-2019

Newtown Neighbourhood Centre Incorporated

(Incorporated under the *Associations Incorporation Act 2009*)

I wish to renew my membership of Newtown Neighbourhood Centre Inc., and agree to be bound by the rules of the Association.

Full name: _____

Postal address: _____

Email address: _____

Occupation: _____

Signature: _____ Date: ____/____/____

Please contact me by Post Email

Membership Fee: Waged \$10.00 Unwaged \$1.00 Organisation \$25.00

Payment method: Cash Cheque Direct Deposit EFTPOS *

Date Paid: ____/____/____

If paying by cash or EFTPOS, Newtown Neighbourhood Centre is open from 10.00 am to 2.00 pm Monday, Tuesday, Wednesday and Friday.

* Note: EFTPOS only available for payments of \$10 or greater.

If paying by direct deposit please ensure your deposit information includes your name and that it is payment for membership. To assist us with tracking payment, please inform us of your deposit by emailing admin@newtowncentre.org or by phone on (02) 9564 7318.

Account details:

Account Name: Newtown Neighbourhood Centre Inc

BSB: 032 036

Account Number: 239458

OFFICE USE ONLY

Date Form Received ____/____/____ Date Payment Received: ____/____/____ Receipt Number: _____