
Membership Application/Renewal

TAX INVOICE

I/We desire to have a membership of Headway Gippsland Inc. and support its purposes and conform to its rules (must be nominated by a financial member).

Details

First Name:

Surname:

Person designated to vote (please print):.....

Signed:.....

Date:

Address:.....

.....

Email:.....

Telephone: Mobile Phone:

- I/we are living with disability
- I/we are supporting community members to those with disability
- I/we represent a supporting organisation
- Other, please specify:.....

Nominated By Financial Member

Name:

Please Tick Any Boxes That Apply To You

- I use Headway Gippsland disability support services
- I am interested in all Headway Gippsland services
- I am interested in supporting Headway Gippsland fundraising activities
- I am interested in supporting people with disability as a volunteer
- I am interested in volunteering on the Board of Directors

Membership Application/Renewal

- I have a disability and need help
- I am a carer needing help

I give permission for my details to be given to appropriate staff/board members in order to facilitate the above.

Signed:.....

I/we give permission for photographs taken at Headway Gippsland activities to be used in media and promotion.

Signed:.....

Yearly Membership Subscription

- | | | | |
|---------------------------------------|---------|-------------|--------------------------------------|
| <input type="checkbox"/> Individual | \$10.00 | BSB | 633 000 |
| <input type="checkbox"/> Family | \$15.00 | Account No. | 1576 1537 8 |
| <input type="checkbox"/> Organisation | \$20.00 | Reference: | please use your first and last names |

Newsletter

Would you like to subscribe to Headway Gippsland's seasonal newsletter?

- Yes, via email
- Yes, via post
- No

Postal address/email:

Donations

Donations can be made at any time and are tax deductible if over \$2.00, under the Income Tax Assessment Act 1997, Section 45-30B.

Amount \$.....

Authorised by Board of Directors

Receipt No.

Date

Signed.....

Please email this completed form to finance team at financeteam@headwaygippsland.org.au