



# Melbourne Clivia Group Inc.

Burwood East LPO  
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secretary@melbournecliviagroup.org.au

## **APPLICATION FOR MEMBERSHIP/RENEWAL OF THE MELBOURNE CLIVIA GROUP INC. 2024**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

- I wish to become a member of the Melbourne Clivia Group Inc. In the event of my admission as a member, I agree to support the purposes of the MCG Inc. and to comply with the rules of the group.
- I wish to renew my membership.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Membership options:**

- Single Membership 2024 (electronic newsletter) \$20
- OR**
- Single Membership 2024 (hard copy newsletter) \$30
- Each additional family member \$15

### **Payment options:**

- Cash (at meetings)
- Cheque (*payable to Melbourne Clivia Group Inc.*)
- Direct Deposit (BSB 083657; Acc. 829745477)

**Additional family members:** (\*please add all names & signatures)

Name	Signature

***Please note that payment of the appropriate amount must accompany the completed application form. Please send to the above address or give in person to the Treasurer***