



121 Care Inc - Membership Application Form

To: Faith Baigent – Secretary, 121 Care Inc., PO Box 368, Cotton Tree QLD 4558

Date:.....

I, hereby wish to apply to become a financial member of 121 Care Inc. for one year, from **October 2017 – October 2018**.

Name:.....

Address:.....

Suburb: Postcode:.....

Email Address:.....

Phone: Mobile:.....

Signature:.....

Proposed By: Seconded by:.....

Membership Fee:

Five Dollars per Person: x @ \$5.00 = \$

Ten Dollars per Family: x @ \$10.00 = \$

New members need to be approved by the Management Committee.

For any further information or additional membership forms, please contact our office on 07 5443 9777.

Payments:

Payments can be made by cheque (made out to 121 Care Inc.), cash or direct deposit into the 121 Care bank account, details as follows:

Account Name: 121 Care Inc.
BSB: 014650
A/C No. 259 366 423
Bank: ANZ
Reference: AGM + your surname

Credit Card Payments:

Visa Mastercard

Name on card:

Card Number:

Expiry Date: / CCV: