

# Brighton Cemeterians Inc. (A0048578B)



I, .....  
(Name)

of .....  
Residential Address

desire to become a member of Brighton Cemeterians Inc. (A0048578B)

In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

..... Phone No. ....  
(Signature of Applicant is required)

..... Date: ..... / ..... / 2017  
(Email address)

I am rejoining

I am a new member

## ANNUAL MEMBERSHIP TO 30 JUNE 2017

(Please tick ONE ONLY)

- |                          |  |          |
|--------------------------|--|----------|
| <input type="checkbox"/> | Single Adult - electronic newsletter by email<br>(a valid email address is required) | \$A10.00 |
| <input type="checkbox"/> | Single Adult - hardcopy newsletter by post (black & white)                           | \$A20.00 |
| <input type="checkbox"/> | Single Adult - hardcopy newsletter by post [colour]                                  | \$A30.00 |
| <input type="checkbox"/> | Family - electronic newsletter by email<br>(a valid email address is required)       | \$A15.00 |
| <input type="checkbox"/> | Family - hardcopy newsletter by post (black & white)                                 | \$A25.00 |
| <input type="checkbox"/> | Family - hardcopy newsletter by post [colour]  | \$A35.00 |

Yes, I would like to make a donation to the Brighton Cemeterians Inc! \$A \_\_\_\_\_

TOTAL: \$A \_\_\_\_\_

Please return this application form with your cheque or money order (no cash) made out payable to "Brighton Cemeterians Inc.":

Brighton Cemeterians Inc.  
PO Box 8054  
North Road LPO  
EAST BRIGHTON VIC 3187 AUSTRALIA

For more information, contact us via email: [info@brightonceterians.org](mailto:info@brightonceterians.org)  
ring 03 9558 4248 or write to us at the above address.