

TITLE ..... NAME .....

POSTAL ADDRESS .....

POSTCODE ..... TEL (H) ..... (W) .....

(M) .....

WOULD YOU LIKE TO RECEIVE THE GALLERY'S E-NEWSLETTER, GALLERY UPDATE EMAILS AND INVITATIONS ELECTRONICALLY?  YES  NO

EMAIL .....

PLEASE TICK WHICH DAYS YOU WOULD MOST LIKELY VISIT THE GALLERY

	AM	PM
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

## MEMBERSHIP RATE

- |  |      |  |         |
|--|------|--|---------|
| <input type="checkbox"/> U18                 | \$7  | <input type="checkbox"/> CORPORATE DONOR   | \$322*  |
| <input type="checkbox"/> STUDENT/ CONCESSION | \$10 | * (INCLUDES \$300 TAX DEDUCTIBLE DONATION) |         |
| <input type="checkbox"/> INDIVIDUAL          | \$12 | <input type="checkbox"/> LIFE MEMBER       | \$1000^ |
| <input type="checkbox"/> HOUSEHOLD           | \$17 | ^ (INCLUDES \$500 TAX DEDUCTIBLE DONATION) |         |

(THESE FEES INCLUDE GST)

## ABOUT YOU (OPTIONAL)

PLEASE INDICATE YOUR MAIN INTEREST AREA (EG CONTEMPORARY ART, ABORIGINAL ART, CRAFT)

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WOULD YOU LIKE TO BECOME A VOLUNTEER?  YES  NO

OFFICE USE ONLY:

\*CASH                      \*CHEQUE                      \*MONEY ORDER

RECEIPT NUMBER:                      DATE PAID:

RECEIPT ISSUED:    \*YES                      \*NO

RENEWAL DATE:

CARD ISSUED:    \*YES                      \*NO                      MEMBER NUMBER:

ADDED TO DATABASE: ..... / ..... / .....