



# Kytherian Association of Australia

ABN 36 000 263 954

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www.kytherianassociation.com.au

## MEMBERSHIP RENEWAL 2020

FULL MEMBERSHIP

ASSOCIATE MEMBERSHIP

(please tick)

I/we, the undersigned would like to renew our membership of the Kytherian Association of Australia. I/we agree to be bound by the Memorandum and Articles of Association and any Rules, Regulation or By-Laws of the Kytherian Association from time to time in force.

Please tick:

<b>Family</b> ( <i>more than one person per household</i> )	Residing in Australia	<b>\$60</b>	
<b>Family</b> ( <i>more than one person per household</i> )	Residing outside Australia	<b>\$75</b>	
<b>Single Person</b>	Residing in Australia	<b>\$35</b>	
<b>Single Person</b>	Residing outside Australia	<b>\$50</b>	

**Member 1:**

**Membership Number** (if known) : \_\_\_\_\_

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

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

**Member 2:**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

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

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

State: \_\_\_\_\_ Postcode: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**ENCLOSED: Subscription (Please Circle amount paid, as per categories appearing above)**

**Family Rate \$60 / \$75 Single Rate \$35 / \$50**

Would you like to receive a membership card. Yes / NO

**\*\*\* Tax Deductable donation to KythCare\*\*\***

If you would like to donate to the **KythCare** please indicate below.

All donations over \$2 are take deductible and the money will be used **only for Aged Care support in Australia.**

No thank you

Yes I would like to donate, PLEASE ADD \$ \_\_\_\_\_ to my Renewal

Enclosed: **Cheque / Money Order / Credit Card details below** (Master/Visa)

Card No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiry Date \_\_\_\_ / \_\_\_\_

CCV (3 digit no on back of card) \_\_\_\_\_

Signature (as shown on card) \_\_\_\_\_

If you have any queries about your membership call us or email to: [member@kytherianassociation.com.au](mailto:member@kytherianassociation.com.au)

**FOR OFFICE USE ONLY**

Date received..... Cheque / CC / Money Order Amount: \$ .....

Processed by .....