



MEMBERSHIP APPLICATION FORM

LAUNCESTON HORTICULTURAL SOCIETY INC.

I, (Ms. Mrs. Miss. Mr.) _____

Of _____ P/Code _____

(please tick) Apply to become a **new member** or **renew my membership** of the Launceston Horticultural Society.

Phone No. _____ Mobile _____

Email _____

My special interest is: _____

How do you wish to receive your quarterly Landscape newsletter and Show Schedule?

(please tick) Mail or Email

I agree to abide by the constitution and by-laws of the Launceston Horticultural Society Inc.

(signed) _____ Date _____

Annual Membership:

\$15 single

\$25 family

Please return to: The Treasurer

Launceston Horticultural Society Inc.

P O Box 2043

LAUNCESTON Tas 7250

HOW TO PAY:

Direct Deposit: Launceston Horticultural Society Inc.

BSB 067003 ACCOUNT 28017209

Note: Please include your initials and surname as an identifying factor in the description field on the electronic payment.

Please also return a completed membership form by post.

OR BY

Cheque made payable to the Launceston Horticultural Society Inc. and forwarded with a completed membership form.

OR BY

Cash or cheque at a general meeting along with a completed membership form.

MAILING ADDRESS:

The Treasurer

Launceston Horticultural Society Inc.

PO Box 2043

LAUNCESTON Tas 7250