

Membership Options

Picton District A. H. & I. Society Inc.

151 - 155 Menangle Street Picton NSW 2571 - PO Box 34 Picton NSW 2571

ABN: 61 613 759 719

oldrazorback@bigpond.com

02 4677 2485

MEMBERSHIP APPLICATION

() \$20.00 () \$10.00 () \$10.00 () \$50.00 Full Name:	Adult Junior Aged Pensioner Family Membership	(al forms)
Address:				
Email:				
*Membership	renewal reminders will l	be emailed prior to membership	expiry.	
Contact Number: Date of Birth:			Date of Birth:	
		ember of the Picton Show Society ay of Every Month, unless notifie		/No:
I also wish to become a Volunteer of the Picton Show Society:			Yes/	/No:
Payment Options				
` '	pos Payment at the Ann osit (Banking Details on	9		
Signature:			Date:	

At the completion of the form, please mail to **PO Box 34 Picton NSW** or alternatively hand in at the annual general meeting.

of our Members and Volunteers and any data recorded on this form will be used for Show Society purposes only.

By signing this form, I declare the information above to be true and correct. The Picton Show Society respects the Privacy Rights