

MEMBERSHIP FORM

caxton

legal centre inc

| PERSONAL DETAILS | | | | | |
|---|--|--|---------------------------|--|--|
| FULL NAME: | | | | OCCUPATION: | |
| ADDRESS: | | | | SUBURB: | |
| POSTCODE: | | PHONE: | | MOBILE: | |
| EMAIL: | | | | | |
| MEMBERSHIP DETAILS | | | | | |
| Are you a volunteer at the Centre? | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| I apply for membership/renewal of membership with CAXTON LEGAL CENTRE INC. for the year ending 30 June 2023 as follows (all membership fees include GST): | | | | | |
| <input type="checkbox"/> \$22 | Full Membership | | | | |
| <input type="checkbox"/> \$11 | Concession Membership (for volunteers, students, unwaged people) | | | | |
| <input type="checkbox"/> \$33 | Non-Profit Organisation Membership | | | | |
| <input type="checkbox"/> \$55 | Corporate Body Membership | | | | |
| FOR MEMBERSHIP RENEWALS ONLY | | | FIRST YEAR OF MEMBERSHIP: | | |
| PAYMENT AMOUNT | | | | | |
| \$ | | Membership Fee | | | |
| \$ | | Donation (all donations are tax deductible) | | | |
| \$ | | TOTAL | | | |
| PAYMENT METHOD A paid tax invoice will be sent to you once payment is received | | | | | |
| <input type="checkbox"/> Cheque / Money Order | | Please post to: 1 Manning St, South Brisbane Qld 4101 | | | |
| <input type="checkbox"/> Electronic Funds | | Westpac: Caxton Legal Centre Inc BSB: 034 065 Account Number: 22 4000 Please note your NAME in the reference field | | | |
| <input type="checkbox"/> Visa | | Card Holders Name: | | | |
| <input type="checkbox"/> Mastercard | | Card No: _____ Expiry Date: __ / __ | | | |
| AUTHORISATION AND CONFIRMATION | | | | | |
| I authorise the above payment to be deducted from my credit card(where applicable) and/or confirm the above details to be true and correct | | | | | |
| SIGNATURE: | | | | DATE: | |
| In accordance with section 70 of the Associations Incorporation Act 1981 (Qld), you are advised that Caxton Legal Centre Inc. holds a current public liability insurance of \$10,000,000. | | | | | |
| Please send your completed membership application to accounts@caxton.org.au and cc lisa@caxton.org.au | | | | | |

Why did you choose to apply for membership with Caxton Legal Centre?

Click or tap here to enter text.

How did you hear about Caxton?

Click or tap here to enter text.

Are you involved in other external committees or subcommittees? If so, which ones?

Click or tap here to enter text.

Would you like to receive regular updates from Caxton and what would be your points of interest?

Click or tap here to enter text.

What types of events would you like to see us host in the future?

Click or tap here to enter text.

Do you currently follow our organisation on social media? If so, which platforms do you use?

Click or tap here to enter text.