

Payment

- Membership Fee** \$.....
- I would like to donate** \$.....
- Total** \$.....

Payment Method

- In cash**
- Cheque enclosed**
- I have transferred the money to**
BSB 034 063, Account No 203 097
Account Name: Cubberla-Witton Catchments Network
Credit Institution: Westpac Indooroopilly
Reference:

.....
Very important!!! Please repeat reference used in transaction, preferably your name.

Please mail application to:
Cubberla-Witton Catchments Network Inc,
PO Box 5200
KENMORE EAST 4069

Membership Application/Renewal

Family Name:.....

First Name:.....
(If family membership, please list all name)

Address:

Phone:..... **Mobile Phone:**.....

Email Address:.....

Membership Fees (Please tick):

- Regular/Family** **\$22 incl. GST per annum**
- Concession** **\$11 incl. GST per annum**

Please note, our membership year is a full calendar year. Renewals are due by 1st January of each year.

I would like to join the Cubberla-witton Catchments Network Inc

Date:..... **Signature:**.....

Please fill out the questionnaire overleaf. Thank you.

**My main interests are indicated below.
 I am happy to participate in activities or support CWCN as per ticked box.**

- | | |
|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Waterwatch/Water quality monitoring | <input type="checkbox"/> Creation of Display Material |
| <input type="checkbox"/> Bushcare | <input type="checkbox"/> Event Organisation |
| <input type="checkbox"/> Native Flora/Plant ID/Botanical Information | <input type="checkbox"/> Educational Materials/Flyers |
| <input type="checkbox"/> Seed Collection/Plant Propagation | <input type="checkbox"/> Finding Sponsors |
| <input type="checkbox"/> Native Fauna | <input type="checkbox"/> Grant Applications |
| <input type="checkbox"/> Fish | <input type="checkbox"/> Implementation of Regional NRM Plan(s) |
| <input type="checkbox"/> Invertebrates | <input type="checkbox"/> Working with Children (schools, youth groups, school holiday activities etc.) |
| <input type="checkbox"/> Birds | <input type="checkbox"/> Publicity/Media |
| <input type="checkbox"/> Mammals | <input type="checkbox"/> General Admin Tasks |
| <input type="checkbox"/> Amphibians | <input type="checkbox"/> IT Support |
| <input type="checkbox"/> Reptiles | <input type="checkbox"/> Social Media (Website, Facebook, Twitter) |
| <input type="checkbox"/> Fungi/Lichen | <input type="checkbox"/> CWCN Centre—Ground Maintenance |
| <input type="checkbox"/> Book Club | <input type="checkbox"/> CWCN Centre—House Maintenance |
| <input type="checkbox"/> Oral Histories (gathering, processing) | |
| <input type="checkbox"/> Other: | |

**I want
 to become
 a member!**

Membership Application

Please talk to us about your interests. Our members' interests are diverse.
 Shared interests and shared activities provide for fun and satisfaction.

ABN 21 367 529 654

If you have any questions contact us on 07 3878 4581 or email to cwcncmail@tpg.com.au

