



Friends of the Melton Botanic Garden Inc. (FMBG) Membership Application/Renewal (July 2026 to June 2027)

Annual memberships are due by 1st July

Name: _____

Address: _____

Postcode _____

Phone: _____

Mobile Phone: _____

Please contact me by email *(Please note for sustainability and to reduce costs we only contact members by email)*

Email Address (please print clearly):

New member* or **Renewal** *(please tick one)* **Date:** ____/____/____

* Applications for new membership are considered for approval at the Committee Meeting.

* Applications received after the 1st July are ineligible to vote at the August AGM.

Membership *(please tick only one membership category – fee charge is for July to June – fees are per financial year)*

1 Year	2 Yrs	Membership category	Donation										
<input type="checkbox"/> \$10	<input type="checkbox"/> \$20	Individual	<input type="checkbox"/> \$ _____										
<input type="checkbox"/> \$5	<input type="checkbox"/> \$10	Concession <i>(Health Care Card holder/Pensioner/Senior Card holder)</i>											
<input type="checkbox"/> \$5	<input type="checkbox"/> \$10	Full-time Student <i>(18 years or over or parental permission needed)*</i>	<table border="1"> <tr> <th colspan="2">Office use only</th> </tr> <tr> <td>Subscription</td> <td>\$ _____</td> </tr> <tr> <td>Donation</td> <td>\$ _____</td> </tr> <tr> <td>Total</td> <td>\$ _____</td> </tr> <tr> <td>Receipt#</td> <td>_____</td> </tr> </table>	Office use only		Subscription	\$ _____	Donation	\$ _____	Total	\$ _____	Receipt#	_____
Office use only													
Subscription	\$ _____												
Donation	\$ _____												
Total	\$ _____												
Receipt#	_____												
<input type="checkbox"/> \$20	<input type="checkbox"/> \$40	Household <i>(up to two adult persons living in the same house and dependent children under 18 – please list all household member names below)</i>											
<input type="checkbox"/> \$10	<input type="checkbox"/> \$20	Household concession											
<input type="checkbox"/> \$50	<input type="checkbox"/> \$100	Corporate <i>(5 contacts & listing on FMBG website – please list all contact names below)</i>											
<input type="checkbox"/> \$20	<input type="checkbox"/> \$40	Associate <i>(Associate Membership is for 'friends of the FMBG' who share a likeminded interest or where normal membership may result in a conflict of interest. Associate members foster and support the work the FMBG. If the associate membership is for a group only one person from that group may be nominated, which is usually the Secretary or President of the group)</i>											

NB: *New members joining 1st April to 30th June have their first-year membership automatically extended to 30th June of the following year.*

As a member you agree to abide by the FMBG Constitution, rules, procedures, practices and by-laws (please tick and sign).

Signature: _____ **Date:** _____

* Under 18 parental/guardian permission required. Parental/Guardian Signature: _____

Household Members/Corporate Contacts *(list the additional members/contacts)*

Name

Email address *(optional)*

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Payment

Payment enclosed \$ _____ *(Cheques/Money Orders payable to Friends of the Melton Botanic Garden Inc.)*

Please forward form with payment to:

Membership Secretary
Friends of the Melton Botanic Garden, Inc.
PO Box 2381,
Melton South 3338

Payment by direct bank transfer to Westpac Melton

Account Name: Friends of the Melton Botanic Garden Inc

Westpac BSB: 033-121 **Account Number:** 208 503

Please ensure that your name appears under the transaction details and also submit a completed form or you can scan and email to friends@fmbg.org.au