

**FRIENDS OF BACK CREEK  
MEMBERSHIP APPLICATION FORM**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**TELEPHONE: BH:** \_\_\_\_\_ **AH:** \_\_\_\_\_

**MOBILE:** \_\_\_\_\_ **E MAIL:** \_\_\_\_\_

**MEMBERSHIP TYPE:** (please tick)       **Family** \*  **Individual**

- Interested in being a paid up member (annual membership \$10.00)
- Interested in receiving a newsletter and staying in touch.
- Interested in being a committee member
- Not able to be a paid up member

**\* OTHER FAMILY MEMBER NAMES:**  
\_\_\_\_\_  
\_\_\_\_\_

**HOW ARE YOU ABLE TO HELP?**

- Typing     Delivery     Promotion     Grant Applications   
Weeding     Pruning     Other

\_\_\_\_\_

Do you know any organisations that can assist us?  
\_\_\_\_\_  
\_\_\_\_\_

<p><b>Suggestions:</b></p> <p>_____</p> <p>_____</p> <p>_____</p>
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**Receipt No.** \_\_\_\_\_      **Date** \_\_\_\_\_


Receipt No. \_\_\_\_\_

Date \_\_\_\_\_