

Murramarang Community Garden Growing Food Together

## Murramarang Community Garden Inc. **Application for Membership Form**

Name	
Postal address	
Email address	
Phone	bile
Contact in case of emergency: Name	Phone

## FEES (Please tick boxes as applicable)

 $\Box$  Membership fee \$10 pa

□ Plot Rental \$30 pa.

Donation to Murramarang Community Garden Inc. (Please enter amount) \$...

## **TOTAL** (Please enter amount): \$.....

## Payment options (please tick one):

Cash payment delivered with this form to the Treasurer

Direct Debit: BSB 641 800 Acc # 200597940 (include your name)

I hereby apply to become a member of the abovenamed Incorporated Association. I agree to be bound by the Rules of the Association. NB - members are directed to the MCG Plan of Management, available on the MCG website, for information on the conditions that govern membership and the management of the garden.

..... Signature of applicant

.....

Date

Please forward this form to: The Treasurer: Robyn Johansson murramarangcommunitygarden3@gmail.com

Murramarang Community Garden Inc. ABN 78 483 124 422