



MEMBERSHIP FORM 2020

First Name: _____ Date of Birth: ____/____/____

Surname: _____ Gender: Male Female Other

Email address: _____ Please tick if you do NOT want to receive the PBS eNews:

Work Phone: _____ Home: _____ Mobile: _____

Address: _____

Suburb: _____ Postcode: _____

I would like to take out the following membership to PBS (*tick one*)

- | | |
|---|---|
| <input type="checkbox"/> Junior (under 12's) \$40 | <input type="checkbox"/> Proud (concession) \$40 |
| <input type="checkbox"/> Proud \$85 | <input type="checkbox"/> Passionate \$120 |
| <input type="checkbox"/> Patron \$195 | <input type="checkbox"/> Performer \$120* |
| <input type="checkbox"/> Business \$600* | <input type="checkbox"/> Friend for a Decade \$700 |
| <input type="checkbox"/> Friend for Life \$1600 | <input type="checkbox"/> Platinum Business (10 years) \$4400* |

Favourite Program: _____

*ON AIR NAME : (_____)

MAKE IT HOME FUNDRAISER DONATION

***All donations over \$2 are tax deductible!**

- Over \$25,000 Sky's the Limit* _____ enter amount here.
- \$25,000 Raising the Roof*
- \$10,000 Higher Ground*
- \$5,000 Build Me Up*
- \$1,067 Good Vibrations*
- \$500 Brick by Brick
- \$250 Foundation
- \$2 to \$249 Basement Jams _____ enter amount here.

Other amount: _____

*You'll be acknowledged on a plaque at our new home. Tick to remain anonymous on air.

I'd like to have my membership payment automatically deducted annually*

My credit card number is:

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Expiry Date

..... /

Name on card

Total \$.....

All cheques payable to PBS send to PO Box 2917, Fitzroy MDC 3065