



MEMBERSHIP FORM 2021

Member # (if app) _____

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*)

- Junior (under 12's) \$40
- Proud (concession) \$40
- Proud \$85
- Passionate \$120
- Patron \$195
- Performer \$120*
- Business \$600*
- Friend for a Decade \$700
- Friend for Life \$1600
- 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