



Please complete and forward. With Internet banking please show your name in 'particulars' on banking details, and forward form as this is the only way we can process your application.

<h2>Membership Application Form</h2>	
Dr ? Miss ? Ms ? Mrs. ? Mr. ? Other ?	First Name*
	Last Name:*
Address Street	*
Suburb	*
City	*
Country (if overseas)	*
Telephone	Home
	Work
Mobile number	
E-mail for newsletter delivery	*
*Must be shown	
<b>Annual Membership Subscription Rates</b> - \$15.00 Student. Active Friends guide/host - \$20.00 Individual - \$25.00 Family/Couple - \$25.00 School & Community Groups	Annual subscription \$ _____ Donation Friends \$ _____ TOTAL PAYMENT \$ _____ <b>Donations over \$5 tax deductible receipt sent</b>
Please make your cheque payable to:	Friends of the Wellington Botanic Garden Inc
<b>Electronic payment</b> direct to Friends bank account <b>Account number</b> <b>02 0500 0080203 00</b>	Please record your name in 'particulars section' with bank and forward completed application form for our records, as this is the only way we can process your application.
<p><b>Friends of the Wellington Botanic Garden Inc.</b> Post completed form to: <b>Membership Secretary</b> <b>P O Box 28-065</b> <b>Wellington</b> <b>OR</b> scan and e-mail to <a href="mailto:sarahnorling@xtra.co.nz">sarahnorling@xtra.co.nz</a></p>	