Society Library:
201 Unley Road
Unley SA 5061
Australia
Tel: (08) 8272 4222
Fax: (08) 8272 4910
E-mail:
saghs.admin@saghs.org.au
Postal Address:
GPO Box 592
Adelaide SA 5001
Australia

South Australian Genealogy & Heraldry Society Inc.

(ABN 64 788 909 036)

Membership Renewal Form

1 July 2011 to 30 June 2012

☐ **Full member renewal (Australian) - $70.00 GST inclusive** **$.....**

☐ **Associate member renewal (Australian) - $35.00 GST inclusive** **$.....**

(Must be an immediate relative or partner living at the same address as a full member)

☐ **Journal subscription only (Australian) - $26.00 GST inclusive** **$.....**

☐ **Library Fund donation - (tax deductible)** **$.....**

☐ **Full member renewal (Overseas) – AUD70.00 GST exclusive *** **$.....**

☐ **Journal subscription only (Overseas) - AUD26.00 GST exclusive *** **$.....**

(* includes surcharge for overseas postage costs) **Total Paid** **$.....**

Tax Invoice will be provided on request.

Renewal in person can be made in cash, by cheque or using EFTPOS at the Library, or payment by credit card over the phone, during normal Library business hours.

Members wishing to renew by post can do so by cheque, Postal Order, or forwarding credit card details by completing and returning the bottom part of this form with your payment.

Members paying by EFT can do so to the Society's Bank SA Account **BSB No 105 168** and **Account No. 777964640** in the name of South Australian Genealogy & Heraldry Society Inc. Please confirm details of the transfer and your membership number by email to the Membership Officer at saghs.members@saghs.org.au.

Payment via Paypal is available at the Society's Paypal Account at saghs.admin@saghs.org.au

Please advise the Membership Officer of any changes to your contact details by post, fax or email at saghs.members@saghs.org.au

Name…….. Membership Number ……

Street/PO Box …….

Suburb/Town ……... State ……. Postcode...……

Country ……..Telephone ( )……

Email…|__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__||__|

……...

Card Number (Visa, Mastercard) |__||__||__||__| |__||__||__||__| |__||__||__||__| |__||__||__||__| |__||__||__||__|

Name on Card **……...** **Expiry Date** **……**

Signature **……** **Date** **…….**

OFFICE USE: Receipt No…….……Date……/……/……Amount $...……...