



heart of a community | hope of a nation

Membership Form

NAME: _____

ADDRESS : _____

Hm Ph No: _____ BH Ph No: _____

Mobile: _____ E-MAIL: _____

| | | |
|---------------------------------|--|----|
| Individual Annual Membership | \$82.50 | \$ |
| Individual 2 Year Membership | \$165 | \$ |
| Individual Gold Life Membership | \$1,100 | \$ |
| | | |
| Club Annual Membership | \$165 | \$ |
| Club Gold Life Membership | \$1,650 | \$ |
| | | |
| | Please include my donation | \$ |
| | (All fees inclusive of 10% GST) TOTAL DUE | \$ |

Do you have a favourite Trust? Please tick.

Autism Trust

Ô@ã | à : ^ } q • Á Ôæ } & ^ : Á æ } à Á Š ^

Cranio Facial Surgery Trust

Destiny Youth Trust

Diabetes Mellitus Trust

General Trust

Melanoma Trust

Robert Stolz Fine Arts Trust

W } à ^ :] | ã ç ã | ^ * ^ à Š Ô@ã | à W } à ^ Á V } || ã ç ã Á ^ * ^ à Š Ô@ã | à : ^ } ^

ALL DONATIONS OVER \$2 ARE TAX DEDUCTIBLE

Payment Method (please circle) : MO CHQ M/C B/C DINERS AMEX VISA

Card number:

Expiry Date: _____ / _____

Name on Card: _____

Signature: _____

Please tick box for information of upcoming Apex events, news and achievements

CHEQUES PAYABLE TO: THE APEX FOUNDATION
PLEASE POST TO: APEX FOUNDATION, LEVEL 5, 201 KENT ST SYDNEY NSW 2000
 Ph: 02 9253 7775 Fax: 02 9253 7117 Email: info@apexfoundation.org.au