

Membership Application

Mallacoota Inlet Aged Care Inc
PO Box 215
Mallacoota Vic 3892

A0026537X
ABN 17 554 852 472

Name: _____

Postal Address: _____

Email Address: _____

Telephone: _____

Subscription:	\$5.00 per person	I / We enclose	\$
Bricks:	\$2.00 per brick	I / We enclose	\$
Donation:	<i>(Over \$2 is tax deductible)</i>	I / We enclose	\$
TOTAL:			\$