

**Renewal /New Member Nomination Form 2024 MSV Centre (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_**

## MEMBERSHIP CATEGORIES and FEES: Circle membership type and complete payment details.

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| **MEMBERSHIP TYPE** | **Membership Notes** | **ANNUAL FEE** | **AMOUNT** |
| STUDENT | A student is under the age of 18 | $50 |  |
| ADULT /PENSIONER |  | $55$50 |  |
| FAMILY | A family is any number of adults and children in the one family, as listed on form below. | $90 |  |
| INSTITUTION | Institution refers to a school or organisation who wishes to receive newsletters and information about the Society’s activities. | $150 |  |
| DONATION | **Please consider this option**  **All donations to the Musical Society are tax deductible** |  |  |
| The Society is not registered for GST and GST is not charged on our subscription **TOTAL AMOUNT DUE** | | |  |

**PAYMENT OPTIONS: a) Cheque payable to The Musical Society of Victoria Inc.**

**b) Credit card – see details below**

**c) Direct Debit – BSB: 013-350 Account Number 6479-74607 Ref: membership subscription**

**PLEASE TICK OR HIGHLIGHT THE OPTION YOU HAVE CHOSEN**

Download form, fill in and send as an attachment to [musvic@bigpond.net.au](mailto:musvic@bigpond.net.au) signature not required

Master Card \_\_ Visa Card \_\_ Card No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date \_\_\_\_\_/\_\_\_\_\_

Name on Card\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature if returning by mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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## **MEMBER INFORMATION**:

## Title \_\_\_\_\_\_ Given Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Family/Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Suburb\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_PH:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **FAMILY INFORMATION:**

# Mother’s Name and email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Father’s name and email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# List Student Names Date(s) of Birth Instrument(s) played.

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**Please return to: The Hon. General Secretary, MSV, P.O. Box 2234 Wattletree Road P.O. VIC. 3145**