



BLACKWOOD & BARRY'S REEF LANDCARE GROUP MEMBERSHIP FORM

FIRST NAME:

SURNAME:

MEMBERSHIP: ☐ HOUSEHOLD (\$20-pa) ☐ SINGLE MEMBERSHIP (\$15-pa)

Membership is due each financial year payable on invoice. Renewals sent out mid May payable by July 1, 20xx

ADDRESS:

Are you ☒ Fulltime ☐ part-time?

PHONE NUMBER:

EMAIL ADDRESS:

*HOUSEHOLD MEMBERSHIP ONLY:

NAME 2:

PHONE NUMBER:

EMAIL ADDRESS:

NAME 3:

PHONE NUMBER:

EMAIL ADDRESS:

How would you like to be Involved? (Check as many as you like)

☐ Physically Active
- Weed management, Weeding Bees, Revegetation, Committee

☐ Passive Supporter
- Workshops, Presentations, Paying Dues

☐ Technical / Professional
- Social media/grants

☐ Equipment Loaning/ Equipment Management
- borrowing Landcare tools, re chipper

☐ First Nations and Caring for Country Initiatives

Signed:

Date:

*Please fill out the form save it with your surname & email it back to 3458landcare@gmail.com.
On receipt we will send you an invoice & bank details.*