

MEMBERSHIP FORM 2022-2023

Thank you for your interest in the Kalamunda Community Garden



Please complete this form and submit it with the appropriate membership fee.

Membership Fees: All membership periods are to 30 th June 2023. <i>(Plot rental fees do not include membership)</i>				
	12 Months	9 Months	6 Months	3 Months
Family (2x Adults and all your Children)	\$ 40.00	\$ 30.00	\$20.00	\$10.00
Garden Supporter (GS)	\$ 25.00	\$ 19.00	\$13.00	\$ 6.00
Garden Volunteer (GV) <i>Minimum volunteering involvement of a GV is x 1 busy bee each month throughout the Year</i>	\$ 15.00	\$ 11.00	\$ 8.00	\$ 4.00
Plot rental	\$100.00	\$ 75.00	\$50.00	\$25.00

Plot Number #: _____

Bank Details: Bendigo Bank (**Payment by EFT is the preferred option to assist with administration**)

Account Name: Kalamunda Community Garden Inc. **BSB:** 633 000 **Account Number:** 178 780 565

Please use your surname/group name as a reference.

OR send your cheque with completed form to KCG, 8 Lindsay Street, Kalamunda WA 6076

I grant permission for images taken of me, and/or members of my family, to be used in the promotion of the Kalamunda Community Garden Inc. (Please select one option) YES NO

AND

I wish to receive emails, newsletters, and general information about the KCG: (Please select one option) YES NO

Name (including all family members for Family Membership)

Email Address

Contact Number

Postal Address

Signature

Date

Please indicate if you **do not** wish your contact details to be shared with other members. ()

Following the electronic funds transfer (EFT) of your membership fee, please email your completed form (unless you are renewing) to June Williams via kalacommunitygarden@gmail.com

OFFICE USE ONLY

Amount paid		Membership #	
Date Paid		Entered Database	
Thank You letter sent		Welcome letter sent	