



## **Friends of SAVI Membership Application**

### **Membership July 2006 - June 2007**

**Membership category: (tick one)**

- Stepfamily membership
- Associate membership (other interested individuals/organisations)

Name(s): ..... & .....

Organisation: ..... Job title .....

Postal Address: ..... Post code .....

Phone: H ..... W ..... Mobile .....

Fax: H/W ..... Email .....

Occupation(s) .....

<b>Membership fees \$40 (Inc GST) July 06 – June 07</b>	<b>\$40.00</b>
<b>Plus tax deductible donation</b>	<b>\$ .00</b>
<b>TOTAL</b>	<b>\$ .00</b>

***Your membership of SAVI is a vital contribution to promoting stepfamily well-being***

**Please forward** Renewal and payment to SAVI, PO Box 322, Clifton Hill Vic 3068.

- I enclose my cheque /money order for \$ ..... payable to:  
Stepfamily Association of Victoria (or)
- I wish to pay by \$ ..... credit card. (Mail, or fax to (03) 9481 1700)

Name on Card ..... Expiry date ...../.....

Card Number ...../...../...../...../...../...../...../...../...../.....

Card type: (circle one) visa / mastercard / bankcard      Signature .....

- I am interested in being a volunteer.** Please send me information about (circle any): being a contact person / task groups (eg mailouts, events) / office admin (reception, photocopying, database and word processing) / desktop publishing / bookkeeping / PR / marketing / telephone support / fundraising (or - your special interest) .....

***Thank you for becoming a member and a Friend of SAVI!***

<b>Office Use Only:</b> Receipt no:	DB updated:	Letter sent:
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