



MEMBERSHIP APPLICATION FORM

Membership Dues

Annual membership fee: \$15 per individual; \$20 per couple or family membership dues payable by 31st December each year.

Amount paid \$

Signature:

Application Form

First Name:

Date:

Family name:

Payment options:

Address:

By Direct Deposit:

Postal Address (if different from above):

BSB 633 000 Account No. 176 821 015

Account name: Phillip Island Contemporary Exhibition Space Inc

Email address:

Please use your name as reference.

Telephone:

Or

By cheque or money order attached to Membership Application

Mobile:

Send Membership Application to:

I wish to apply for Membership of Phillip Island Contemporary Exhibition Space Inc.

Membership

PICES Inc

PO Box 2161

Cowes Victoria 3922

Or Email to: pices3922@gmail.com

I support its aims and agree to adhere to PICES' rules and values as outlined in Incorporation Rules.