

Or post to

## **Cumberland Bird Observers Club**

PO Box 550, Baulkham Hills NSW 1755 www.cboc.org.au

Affiliated with BirdLife Australia

## **MEMBERSHIP APPLICATION FORM**

From 1 May to 30 June the following year								
				APPLICAN <sup>®</sup>	Т			
Title	First Name			Surna	Surname			
Address								
Addiess								
						Postcode		
Email						Phone No.		
How did you find out about Cumberland Bird Observers Club?								
OTHER APPLICANT (Family/Couple Membership):								
Title	First Name Surname							
Email						Phone No.		
Lillali						r none No.		
OTHER FAMILY MEMBERS (Family Membership)								
ANNUAL MEMBERSHIP FEES								
Please select the relevant subscription type								
Metropolita	<b>1</b> \$45		Pensioner	\$25	Country	\$25	_	
Family/Coup	<b>le</b> \$50		Student	\$25		1	\$	
Cumberland	Bird Observe	ers Clul	b donation:				\$	
Ψ								
NAME TAG(S)								
Name(s)					\$20 each	Quantity	\$	
						, ,	'	
PAYMENT								
Total Amoun	t Due						\$	
		DCD No.		012 272				
Electronic Transfer		BSB No		012-373 Account Number			222400413	
		Account Name		Cumberland Bird Observers Club				
		Refer	ence	Your full name				
SEND FORM								
Scan & emai	l to	membership@cboc.org.au						

Membership Secretary CBOC Inc. PO Box 550 Baulkham Hills NSW 1755