



**MEMBERSHIP/RENEWAL
APPLICATION**

I / We wish to join / renew: (Single: \$15; Family: \$25; Student/Pensioner: \$10)

Title:..... First name:Surname:

Address:..... Membership: \$.....

..... Postcode:..... Donation: \$.....

Payment enclosed: \$_____

Do you require a receipt? Yes / No

Phone: (Home) (Work)(Mobile).....

EmailFax.....

How did you hear about QWSG?.....

Are you a member of Birds Queensland?

What activities do you wish to participate in? (Please circle)

WADER COUNTS, FIELD TRIPS, SCIENTIFIC DATA COLLECTION, SURVEYS, CLERICAL,
OTHER (specify:.....)

Would you like to receive your newsletter (colour version) by E-mail?.....

Signature Date:.....

Please email this form to: membership@waders.org.au

Or

Please post this form to: QWSG Treasurer, 5 Stanmere St CARINDALE QLD 4152
Cheques to be made payable to: Qld Wader Study Group

Alternatively, if you wish to pay by direct transfer, please contact treasurer@waders.org.au
for account details.