

## Western Suburbs Orchid Society Membership Application Form

Please PRINT clearly and neatly.

Name	
Address	
Contact number	
Email	
Birthday month	(EG March)

Select benching level: (If you're new to orchid growing, select Novice)

- Novice  
 Open

Membership costs per annum:

- \$20 for a single member
- \$30 for a family

Payments can be made at a monthly meeting, by post, or bank deposit. Bank deposit details:

Bank	Commonwealth
Account Name	Western Suburbs Orchid Society Inc
Account number	00901936
BSB	062301
Message	Enter your name to appear on our statement so we know who has paid

Postal address:

The Secretary  
Western Suburbs Orchid Society  
PO Box 53  
Marrickville  
NSW 1475

Please bring this form to a meeting or email it to [secretary@wsorchidsociety.com](mailto:secretary@wsorchidsociety.com).

Memberships are due for renewal in July each year. Any membership unpaid after two months will be terminated without notice.

All details will be kept private and confidential.

**WSOS use only**

Application date	
Paid	

Membership has been:

Approved

Denied

Date	
Signature	