

Payment Details - Membership

Card Number: _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _

Expiry Date: _ _ / _ _ Name on Card _____

Mastercard _____ Visa _____ Cheque (attached) _____ (Please Tick)

Total Amount \$

Signature:

Would you also please confirm your details for our Centurion database.

Name:

Address:

Tel. No.: H Mob

Email address:

Years of Membership: Wife/Partner's Name:

Do you intend to attend the Centenary Dinner? Yes No

Will your partner be attending? Yes No (Please Tick)