



The Richard Wagner Society of South Australia Inc. ABN 17 163 964 669

PO Box 307 North Adelaide SA 5006 Tel (08) 8353 5503

admin@wagnersa.org.au

MEMBERSHIP APPLICATION/RENEWAL 2024

Title:		First Name:		Surname:	
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Second member at same address (joint membership)

Title:		First Name:		Surname:	
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Address:		Suburb:		Postcode:	
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Phone:		Email:	
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Signature:		Date:	
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A SUBSCRIPTION RATES for the period 1 Jan to 31 Dec 2024, Overseas members please add \$20-00 for postage. Payment in \$A (AUD) only.	Individual Member:	\$55-00
	Concession Member*:	\$40-00
	Joint Member:	\$80-00

* I am enrolled as a full time student in _____

OR Centrelink/DVA pension or Unemployment Benefits No. _____

B I would like to make a donation to the Public Fund \$ _____

(Donations of \$2.00 or more are tax deductible - receipts will be issued)

TOTAL A+B \$ _____

I prefer to receive the Society Newsletter in electronic format via the **Yes** **No**
email address above (please circle Yes or No)

Please complete and return with cheque, money order or credit card details to:

The Richard Wagner Society of SA Inc.

at the address shown above. Membership receipts will be sent to you with a future Newsletter or with Membership cards or via email.

Please charge my MasterCard/VISA (not Amex, Diners Club). My card number is:

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Expiry date ____/____

Amount \$ _____

Name on card _____

Your CVV is now required for credit card processing. This is the three-digit number found on the back of your card.

CVV:

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