

# The Friends of the North Coast Regional Botanic Garden

(An Association incorporated in NSW)



## FRIENDS MEMBERSHIP APPLICATION

TICK ONE:  New Membership or  Renewal of Membership

FULL NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

I agree to abide by the Constitution and Code of Conduct of the Friends of the North Coast Regional Botanic Garden. If I choose to volunteer at the Botanic Garden I will abide by the health and safety requirements for volunteers.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**MEMBERSHIP FEES Individual: \$10 Family: \$30** (2 adults + children under 18)

**Option 1. Tick here:**  If membership fee paid at the garden shop Date paid: \_\_\_\_\_  
[Initialled at shop: \_\_\_\_\_]

**Option 2. Tick here:**  If membership fee paid by direct bank transfer

Pay to: 'Friends of the Botanic Garden' BSB **533-000**

Account Number: **328 322 72** Write your family name in the transfer reference.

Scan and email this form to: **membersCBG@gmail.com**

TICK ONE:  Membership Only OR  Plus Volunteer Registration

## FOR VOLUNTEER REGISTRATION - ADDITIONAL INFORMATION IS NEEDED:

**EMERGENCY CONTACT PERSON** (Who to inform in case of an emergency?)

NAME: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

PHONE OF CONTACT PERSON: \_\_\_\_\_

**Do you have any allergies or medical conditions you wish to state in the case of an emergency?** (This information only accessed by a work supervisor when needed)

### TYPE OF VOLUNTEER WORK PREFERRED

Please circle one or more areas of interest:

Information Centre and Shop   Garden Maintenance   Plant Nursery   Guiding

Education & Communications   General Administration.   Herbarium/Garden Database

Other? (please specify)

