

The Friends of State Opera of South Australia Inc.

Membership Application

To join the **Friends of State Opera** or renew your existing membership, please complete and return this form with your remittance to:

**The Secretary,
The Friends of State Opera SA Inc.,
GPO Box No. 2412
Adelaide, SA 5001**

friendssaopera@gmail.com

www.saopera.sa.gov/friends

I wish to apply for:

New Membership Renewal Membership

as:

Ordinary Member \$40

Joint member \$60

(2 people with common residence)

Concession \$30 Pension/Student No. _____

Donation _____

Age Group: Under 25 25-40 40-65 65+

Mr/Mrs/Ms/Miss/Dr/Prof _____

Address: _____

Post Code: _____

Phone: Home: _____ Mobile _____

Email: _____

I wish to receive notices electronically Yes No.

Signature: _____

PAYMENT DETAILS:

Enclosed is my cheque for \$ _____

Cheques made payable to : "The Friends of State Opera of SA"

I prefer to pay by Mastercard Visa

Expiry Date on card : __ / __

CVV (3 digit no. at back of card) __ __

Name on card : _____

Signature: _____

Electronic Funds transfer

ANZ Bank BSB: 015 257 A/C No. 6050 01356

Please be sure to include your name and the word " membership." so that your payment can be correctly identified.

For further information please contact : 0439 981 517