Membership Application

❑ Single Membership ($10 per month)

❑ Couple Membership ($15 per month)

❑ Concession Membership:

- ❑ Single ($10 per quarter)
- ❑ Couple ($15 per quarter)

Christian Democratic Party

❑ I/we wish to pay _____ months in advance $_____

❑ I wish to support CDP financially but do not wish to be a member $_____per month *Donations (incl. membership) are tax deductible up to $100 per tax year per person.*

_____ _____

Signature of applicant(s)

Date_____/_____/20_____

Method of payment

❑ Please debit my credit card as indicated above

_____ /_____/_____/_____ Expiry:____/____

❑ Bankcard ❑Mastercard ❑Visa ❑Diners ❑AMEX

Signature_____

❑ Cheque enclosed, payable to Christian Democratic Party

❑ Please send a form to organise direct bank transfers from my savings/cheque account

Personal information

Title: ❑ Rev ❑ Dr ❑ Mr ❑ Mrs ❑ Miss

Name: _____

Address: _____

_____

Phone (H): _____ Mobile: _____

Email: _____

Mail to

Christian Democratic Party
GPO Box 141, Sydney 2001

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