

BirdLife Photography Membership Application

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP/POSTCODE: _____ COUNTRY: _____

TEL: _____ EMAIL: _____

Annual Membership Fee: **\$15**

I enclose:

1) Membership Fee to BirdLife Photography \$ _____

2) Tax-deductible Donation: \$ _____
(donations go to BirdLife Australia)

TOTAL: \$ _____

Please pay in Australian currency (Cheque / Money order / Visa / Mastercard)

Card No: _____ / _____ / _____ / _____

Expiry Date: ____ / ____

Cardholder Name: _____ Signature: _____

Send payments to:

BirdLife Australia
Supporter Services
Suite 2-05, 60 Leicester Street
Carlton VIC 3053
Australia

birds are in our nature