

Membership Application Form

Graduate Women - NSW Inc

I wish to apply for membership of Graduate Women NSW Inc.

Ms, Miss, Mrs, Dr, Prof:				
Date of Birth:				
Address:				
Suburb/Town:		Post Code:		
Phone: (H) (W/Mb):				
E-mail:				
Degree/Award/Honours Awarded	Institution	Year	Surname Conferred Under	
My professional / general interests are				
would like to join a BranchAmount Enclosed \$				
Full Membership Fee \$40.00 - for the (If you join after 1st April, you will be fill require a receipt Yes / No PLEASE NOTE: If you wish to be a member of will need to send a separate membership a	nancial until 30 June the f	following year	onal body GWI Inc you	
Tax deductible donations to the GW-N Your generous donation assists us in a provided for all donations.				
Enclosed is my tax deductible Education	on Trust donation \$			
Cheques should be made payable (+ printed form) If paying by cheque or requesting Newsletter - please add \$5 to your Or Online Payment (+ emailed form to: admin@gwns	LG Floor, 2 Sydney NS payment. Graduate V ANZ Bank w.org.au) LG Floor, 2 Sydney NS	Graduate Women NSW Inc. LG Floor, 280 Pitt St Sydney NSW 2000 Graduate Women NSW Inc. ANZ Bank BSB: 012 670		