



**THE BELFAST COASTAL RESERVE ACTION GROUP**

**Membership Application Form**

Name: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

**\*\*Membership: \$20 per annum per member. \$50 per affiliated Group**

**PLEASE PAY BY:**

**A: ELECTRONIC TRANSFER**

ACCOUNT NAME: BCRAG INC  
BANK: ANZ  
BSB: 013760  
ACCOUNT: 316087173

**\*EMAIL RECEIPT TO : [bcrag@fastmail.com](mailto:bcrag@fastmail.com) or**

**\*PRINT RECEIPT and post with form to:**

***The Secretary***

***Belfast Coastal Reserve Action Group Inc***

***PO Box 200, Port Fairy. Victoria. 3284***

**B: PAY BY CASH AT MEETINGS/EVENTS.**

*Print-out and fill in this form and pay in cash to Treasurer*

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**OFFICE USE ONLY:**

PAID BY: CASH/BANK TRANSFER

TRANSFER DETAILS:

DATE:

SIGNED BY

MEMBERSHIP NUMBER: