## *FRA Banner 1*

**Membership Renewal**

#### *Please circle type of membership*

|  |  |  |  |
| --- | --- | --- | --- |
| **Membership Type** | **Annual Fee** | **Concession Fee\*** | *FRA coffee cup 3* |
| Single | $25 | $15 |
| Family\*\* | $35 | $20 |
| Friends of the FRA\*\*\* | $15 |  |
| FRA cup purchase (on special offer with membership renewal) | Add $10 | |

***\*****Concession Fee entitlement: Pension recipients and full-time students;****\*\**** *Family membership: Please include all names of all adult members; \*\*\* Do not live in Fitzroy but wish to support its objectives*

**Please tick**

|  |  |
| --- | --- |
| **Amount Paid:** **$** ............... | ** Cheque** (enclosed**)** |
| ** Cash** |
| ** Donation** |
| ** E.F.T.** (please include name on payment) |
| ** Purchase of FRA branded cup** |
| EFT renewal payments: via FRA Direct Credit details:  **Bank:** ***Bank Australia*** – **Account name**: ***Fitzroy Residents’ Association***  **BSB** 313-140, **Account No**: 120 585 98 (Bank Australia account holders code: ‘FIT’) | |

**Name/s** (*please print*)………....……………………………………..……………..…………………….......................

**Home Address:**…....……………………………………….……….……………..….………………….......................

**Postal Address:**…....…………………………………………………...…………….………………….......................

**Phone (1):** ……………………………………..........**Mobile(1):**………………..………....…….....………………..

**Phone (2):** ……………………………………..........**Mobile(2):**………………..………....…….....………………..

**Email (1):** ….……………………………………………………….….…………………….......................................

**Email (2):** ……………………….…………………………………….…….………………….………………………..

**Signature:**……………….……………………………….…. **Date:** ……………………………...................

Key local issues of concern/interest……………………………………………………………………………………...

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**Please send form by post: Secretary, Fitzroy Residents’ Association (FRA), PO Box 2123, Fitzroy, 3065**

**or email: info@fitzroyresidents.org.au**