



APPLICATION FORM

By becoming a member of Parkinson's Victoria, you join a supportive community of thousands impacted by Parkinson's.

Title First Name Last Name

Organisation Name (if applicable)

Postal Address

Suburb State Postcode

Preferred phone number

Email Address

Preferred way to receive communication Mail Email

Date of Birth (if individual)

- I am Living with Parkinson's _____ years since diagnosis
- Living with PSP, CBS or MSA _____ years since diagnosis
- Caring for someone
- A health professional

<input type="checkbox"/>	Annual Individual Member	\$35 incl. GST	\$
<input type="checkbox"/>	Life Member	\$350 incl. GST	\$
<input type="checkbox"/>	Annual Organisational Member	\$195 incl. GST	\$
<input type="checkbox"/>	I would like to make an optional donation (all gifts over \$2 are tax deductible)		\$
			Total \$

Payment details overleaf

MY PAYMENT IS BY:

Visa
 Mastercard
 Cheque (Payable to Parkinson's Victoria)

Name on card

Card Number

Card expiry date

Card Security No.

Thank you for your support!

Once we've processed your application, you'll be sent your membership card and welcome kit within four weeks.
 Should you wish to take advantage of a member benefit in that time,
 please contact Parkinson's Victoria on (03) 8809 0400.

TERMS & CONDITIONS

- I confirm that I am at least 18 years of age
- I support the purposes of Parkinson's Victoria as set out in the Parkinson's Victoria Constitution
- I agree to engage in a respectful manner with Parkinson's Victoria, its representatives and other members
- I am in a position to be able to pay the published membership fees or am able to demonstrate financial hardship so as to establish complimentary membership
- I agree to not have engaged and not to engage in activities that may harm the reputation of Parkinson's Victoria
- I agree not to misrepresent my role or relationship with Parkinson's Victoria by virtue of my membership to Parkinson's Victoria
- I agree that membership and participation is offered at the sole discretion of Parkinson's Victoria, who has the right to offer, accept, reject or revoke any application or existing membership as guided by the Constitution
- I agree that Parkinson's Victoria membership is non-transferable and membership fees are non-refundable
- I accept that the benefits and fees associated with the membership program may be amended or changed from time to time by Parkinson's Victoria as best serves the purposes of the organisation
- I accept that the Parkinson's Victoria board may, by resolution, expel a member if, in their absolute discretion, it is not in the interests of the company for that person to be a member

I agree to membership terms and conditions

NAME

I consent to being contacted occasionally for research purposes.

SIGNATURE

DATE