# Membership Renewal

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| Member details |
| **Membership No./ Reference number** |  |
| **Name** |  |
| **Date of Birth** |  |
| **Address** |  |
| **Phone Number** |  |
| **Email** |  |

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| Membership option  |
| I would like to pay for:* **Option 1:**

$25 One Year Membership * **Option 2:**

$60 Three Year Membership  |
| Payment details  |
| Enclosed is my total payment of $\_\_\_\_\_\_\_\_\_\_* I enclose a cheque (please make cheques payable to Vision Australia Limited)
* Please charge my credit card
* EFT Payment: National Australia Bank (NAB) – BSB 083-004 / Account 01-594-7539
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| **Type of Card** |  |
| **Cardholder’s name** |  |
| **Card Number** |  |
| **Expiry Date**  |  |
| **Signature** |  |

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| Please return  |
| Company Secretary, Vision Australia Limited, 454 Glenferrie Road, Kooyong, Victoria 3144 |
| Standard print is the default format, please indicate if an alternative format is required |
| □ Large Print □ Audio □ Daisy □ Braille □ Email  |
| Privacy |
| I acknowledge that any personal information collected by Vision Australia will be handled in accordance with the *Privacy Act*. I agree that my personal information can be used or disclosed by Vision Australia as contemplated by/in this form. I am aware I can request access to the personal information Vision Australia holds about me. For further information refer to Vision Australia’s [*Privacy Policy*](http://www.visionaustralia.org/privacy-terms-and-conditions/privacy) |
| Annual report |
| Vision Australia will supply members with access to its annual financial, directors and auditors reports online rather than in hard copy format. This change is in line with modern business practice. If you do not have access to the internet or would prefer to receive a hard copy of the report please contact Vision Australia on 1300 84 74 66 with your request. |

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| Office use only |
| Date received by Company Secretary :  | New Expiry Date: |