## THE SYDNEY FUNGAL STUDIES GROUP INC.

Membership Application Form

I/we elect to become a member, and accept the oler.	objectives and rules*, of the Sydney Fungal Studies Group
Full name of applicant. (for joint membership app	
Signature of applicant (and Signature of spouse/p	partner for joint applications)
	Date/
Annual Subscriptions: Please mark one:	,
Ordinary membership \$25.00	
Joint membership\$35.00	
Student membership \$10.00	
Your Address and Contact details: Please provide	e at least one
Address	Fig. 21.
	Email: Home Tel:
	Work Tel:
	Mobile:
The Treasurer, Judith Gover, 5 Dawes St, Little Ba Alternatively, payment can be made by electron  Regarding Newsletters, you may elect,  to receive a mailed copy of the Newsletter of	nic funds transfer (see below).
to receive an email copy of the Newsletter of	nly
to receive both a mailed copy and an email c	opy of the Newsletter.
Please mark one. Note that you may vary your no (The posted Newsletter is monochrome; the ema	•
, , , ,	ce the study of fungi at all levels, particularly the larger knowledge in the science of mycology; and to interact closely related interests.
EFT Payment by internet), not BPAY. On the TRANSFER MONEY menu on your internet Please enter in the TO ACCOUNT box Account Name: Sydney Fungal Studies Group.	bank account  BSB: 032024 Account No: 319768
resount runner syanicy rungar stadies droup.	202. 032024 Account No. 313700

**Amount:** Your subscription amount.

<u>To account description</u>: Please enter your name/s (eighteen characters allowed). This is necessary so that the SFSGI treasurer knows who has paid.

<sup>\*</sup> These can be provided on request. They are based on the standard Model Rules provided by the NSW Department of Fair Trading.

<sup>\*\*</sup>A Joint Membership receives only one copy of mailed Newsletter.