Moths and Butterflies Australasia Inc.



Name:

46 Sullivans Creek Rd, ACTON ACT 2601

ABN 62 509 968 090 (MABA Inc. is not registered for GST)

Membership Application Form

We welcome you to our vibrant and active society. We are confident you will find this the perfect place to learn more about the fascinating moths and butterflies of Australia, New Zealand and adjacent islands.

Address:		
		Postcode:
Email:		Phone:
Fields outlined in red a	re re	quired
Membership categories (please tick one box)	3	Note that for 2022 there are no fees
Ordinary:	\$0	
Student:	\$0	
Concession:	\$0	
Member Body:	\$0	
Butterflies Australasia a Constitution. Other than for the purp	and, ose i	I hereby apply for membership of Moths and if elected, agree to be bound by the provisions of the ntended, any and all information provided on this thout permission from you

Date:

Please save this form to your computer, rename the file with your name as: "Your Name"_membership_application.pdf, and then email to secretary@maba.org.au

Check this Box to accept as above: