

Moths and Butterflies Australasia Inc.

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.

Name:		
Address:		
		Postcode:
Email:		Phone:
Membership categories (please tick one box)		
Ordinary:	\$0	
Student:	\$0	
Concession:	\$0	
Member Body:	\$0	
I hereby apply for membership of Moths and Butterflies Australasia and, if elected, agree to be bound by the provisions of the Constitution.		
Signature:	Da	te:
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		