



Name: _____

Postal address: _____

_____ State: _____ Postcode: _____

Email: _____ Website: _____

Phone: (H) _____ (W) _____ (M) _____ (Fax) _____

I wish to **join** IFFA **OR** I wish to **renew** my membership of IFFA

IFFA Membership type (tick one):

- Family (\$25 per year) Other family members: _____
 Individual (\$25 per year) Concession (\$20 per year)
 Non-profit organisation (\$40 per year) Corporation (\$50 per year)

Membership fee amount: \$ _____

Mailing type:

Post my hardcopy newsletter **AND/OR** Email my .pdf format newsletter

Donation:

I wish to make a donation to IFFA *Donation Amount:* \$ _____

Discount Subscription to Ecological Management & Restoration Journal

I wish to subscribe to EMR at the discount rate of \$68.20 (for calendar year 2010) incl. GST compared with \$90.20 incl GST for non-members. Personal subscriptions only.

EMR subscription Amount: \$ _____

Total: \$ _____

Payment:

- I enclose a cheque for \$ _____ (made out to "Indigenous Flora and Fauna Association Inc.")
 I attach \$ _____ cash (but please do not send cash in the mail)

Please send this form together with your cheque to: IFFA Membership Secretary,
123 Monbulk Road
Kallista 3791

Membership Secretary's use only

TransactionID: _____

New membership

Date Received: _____

Approved date: _____

Receipt sent: _____