

Variety WA Membership Renewal Form



Name: _____

I wish to pay my \$75 inc. GST membership fee by:

Cheque Credit Card

Card type: Visa Mastercard Amex

Card number: _____ Expiry: _____ / _____ CCV: _____

Signature: _____ **Date** _____

A fee of 1.3% will be charged for Amex
Please return to:

Variety WA,
PO Box 669,
VICTORIA PARK WA 6979

*Privacy Collection Statement: Your privacy is respected by Variety. The personal information you provide on this form will be used to assess your eligibility or for the administration of your membership with Variety, the Children's Charity (WA). We may contact you to promote our fundraising events and activities but will not pass your details onto any third party unless required or authorised by law. If you do not provide the information requested your application for membership may not be processed. If you have any privacy concerns or would like to verify information held about you please contact Variety WA.
ABN 14 020 124 537.*

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PO Box 669, Victoria Park WA 6979
(08) 9355 3655 | varietywa.org.au | finance@varietywa.org.au

