PO BOX 830, KOGARAH NSW 1485 Phone: 02 9553 0084 Fax: 02 9588 5290

http://www.hypoglycemia.asn.au

MEMBERSHIP RENEWAL

To renew your membership of the Hypoglycemic Health Association of Australia:

- Send this form to us via post, or e-mail to membership@hypoglycemia.asn.au
- Send payment to us via PayPal (credit card), bank deposit, money order or bank cheque (in AU\$)

Please note that all receipts are issued via e-mail, if you require a receipt posted to you please include a self-addressed stamped envelope.

Personal details					
Title:	Mr	Mrs	Ms	Miss	☐ Dr
First name:				Surname:	
Address:					
State:				Postcode:	
Country:					
Phone:					
E-mail:					
Membership details					
Full membership			\$22.00 for 1 year		\$50.00 for 3 years
Pensioners & Health Care Card holders			\$16.50 for 1 year		\$34.00 for 3 years
Life membership			\$200.00		
Other details					
I wish to receiv	ve newslette	rs via:	E-mail	Post	
Payment					

To pay by PayPal (Visa/Mastercard/AMEX):

Send payment for your chosen membership type to <u>membership@hypoglycemia.asn.au</u>

* Ensure your name and/or e-mail address match this form so we can identify your payment

To pay by bank deposit:

Bank: Westpac **BSB:** 032258 **Account:** 500324

* Please put your name and/or membership number in as the reference

Alternatively, please post a money order or bank cheque (in AU\$) to us attached to this form.