MEMBERSHIP APPLICATION / RENEWAL 2023

Capricornia Budgerigar Society Inc.

Forward to: Capricornia Budgerigar Society Inc.

Secretary: P.O. Box 10165

Frenchville QLD 4701

| Surname: | | |
|-----------------------------------------------|-----------------------------|--------------------------|
| Christian Name: | | (all if |
| partnership) | | |
| Address: | | |
| Emaii: | | **This is vital to |
| allow prompt delivery | y of information to all men | nbers. |
| Phone Number: | Mo | bile: |
| I agree to keep my bi | rds in a suitable environn | nent and use appropriate |
| <mark>husbandry practices.</mark> | | |
| My current exhibition (Open, Intermediate, | status is Beginner.) | |
| Applicant's Signature | 9 | [TT] [SEP] |
| Proposer's Name Signature | Proposer's | |
| Date | | |
| Please make cheques | s payable to: " Capricorni | a Budgerigar Society |
| Membership Rates fo | or 2022:[SEP] | |
| Senior : \$40.00 | Partnership: \$40.00 | Family: \$40.00 |
| | | |

Memberships due by January 01 each year. Membership after June 30 will be \$20 for remainder of current year.

CBS Inc WEBPAGE: www.capbuds.org