



HAWKESBURY WOODCRAFT CO-OPERATIVE LTD

Postal Address: 5 Kerran Close,
Cambridge Park NSW 274
Phone 4721 8709

RENEWAL OF MEMBERSHIP

Surname _____

Other Names _____

Full Postal Address: _____

_____ Postcode _____

Email: _____ Phone: _____

Occupation _____

I consent do not consent to my name, phone number and email address being listed for other members wishing to contact me on Co-op matters only.

Please find attached cash/cheque for \$_____.____being payment of my membership fee.

Dated this _____ day of _____ 20____

Signature _____

NOTE: ALL RENEWAL APPLICATIONS AND FEES SHOULD BE LODGED WITH THE TREASURER.

For Office use only

Date received: _____ Receipt No. _____