



Dame Pattie Menzies Centre Inc.

RENEWAL NOTICE FOR MEMBERSHIP OF THE ASSOCIATION

I.....(full name)

Of (Postal address)

Phone contact.....Email:

I desire to renew my membership of the Association of Dame Pattie Menzies Centre Inc for the 2017/2018 financial year cost \$5.

SignedDate...../...../.....

Dame Pattie Menzies Centre Inc
Proudly Supporting People in the Murrindindi Shire
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