

West Lynn Garden Society Inc.

Telephone (09)827.7045

Application for Membership

To: The Hon Secretary
West Lynn Garden Society
73 Parker Avenue
New Lynn, Auckland 0600

I wish to support West Lynn Garden in providing an ongoing outdoor recreational facility for the community.

Name: _____
(Mr/Mrs/Ms/)

Address: _____

Email: _____

Phone: _____

Member

Family

Life Member

Donation towards Building Fund. _____ \$ _____

(all fees GST inclusive – tick boxes as appropriate)

Enclosed please find the sum of \$ _____ as shown above.

Signed _____ Date _____