

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: _____

Enclosed please find the sum of \$ _____
in payment of subscription as shown below.
(please mark X in the appropriate square)

- Member _____ \$20 p.a.
- Family _____ \$30 p.a.
- Life Member _____ \$150 p.a.

Signed _____ Date _____