

Membership Application 2019

Tax Invoice

The Rett Syndrome Association of Australia Incorporated (RSAA) welcomes membership from families, individuals and other organisations who wish to support our aim of enhancing the quality of life for persons with Rett syndrome, their families and carers.

Membership Details

Please return this form to RSAA – our details are below

Name(s): _____

Phone No: _____

Email: _____

Postal Address: _____

The same membership fee applies, be it for family, individual or organisation

Membership – 1 year (1 July 2019 – 30 June 2020) \$35 (incl. GST) \$

Membership – 3 years (1 July 2019 – 30 June 2022) \$90 (incl. GST) \$

I would like to make a donation (donations of \$2 or more are tax deductible) \$

Total payment amount: \$

I would like a receipt sent to:

Consents *(If you are a parent, guardian or carer of someone with Rett syndrome)*

Do you consent to your name and contact details being provided to:

- Other Australian Rett syndrome families Yes No N/A
- Researchers and organisations studying Rett syndrome Yes No N/A
- Media with an interest in Rett syndrome Yes No N/A
- Any other person/organisation not listed above Yes No N/A

What is your relationship to a person with Rett syndrome? *(this information is optional)*

We know a special Rett person whose name is _____ and whose relationship to us is _____. Date of her or his birth (if known) is ___ / ___ / ___

Payment Options

Please indicate your preference

Transfer to RSAA, Commonwealth Bank:

BSB No: 063010 Account No: 10215821

Please include who has paid and why

Cheque/Postal Order made payable to:

Rett Syndrome Association of Australia Inc

Please send to the address below

Credit Card / PayPal:

Visit www.rettaustralia.org.au/about-rsaa/membership/ to pay online, or provide your card details and signature:

Name on Card: _____ Expiry ____ / ____

Card Number: _____ CVV No: _____

*Thank you
for your support*

I/We would like membership for the period stated above and provide consent as indicated. I/we support the purpose of the Association and agree to be bound by its rules, a copy of which can be obtained by contacting RSAA.

Signature(s): Date:

Rett Syndrome Association of Australia Incorporated ABN: 55 128 238 122

Registered Address: 74 Peter Street, Grovedale, Victoria 3216 Phone: 0418 561 796

Email: admin@rettaustralia.org.au Website: www.rettaustralia.org.au