

MEMBERSHIP FORM

Name:			
Address:			
Phone:			
Email:			
Class of membership* (please tick):	Ordinary 🗆	Associate □	
Fee category (please tick):	<i>Waged</i> \$20 □	Unwaged \$15 □	
Signature:		Date:	
All membership applications are considered by of the outcome and if your application is success			5

Please email a copy of this form to pmrg.committee@gmail.com

are paid, your membership of PMRG is confirmed, and a receipt will be emailed to you.

Thank you for your interest in

Perth Medieval and Renaissance Group, Incorporated

^{*} people under 15 years of age are only eligible for Associate membership